

# **EXHIBIT 73**

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF NEW JERSEY

IN RE: JOHNSON & JOHNSON )  
TALCUM POWDER PRODUCTS )  
MARKETING, SALES PRACTICES, ) MDL NO. 16-2738(MAS)(RLS)  
AND PRODUCTS LIABILITY )  
LITIGATION, )  
\_\_\_\_\_)

VIDEOCONFERENCE DEPOSITION

OF

DANIEL CLARKE-PEARSON, M.D.

(Taken virtually by Defendants)

Wednesday, January 17, 2024

Reported by: Christine A. Taylor, RPR

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<p style="text-align: right;">Page 6</p> <p>1 On January 17, 2024, commencing at  2 9:05 a.m., the videoconference deposition of  3 DANIEL CLARKE-PEARSON, M.D., was taken pursuant to  4 notice and pursuant to the Federal Rules of Civil  5 Procedure, on behalf of the Defendants, remotely  6 via Zoom.  7 ---  8 PROCEEDINGS  9 ---  10 DANIEL CLARKE-PEARSON,  11 having first been duly sworn, was examined  12 and testified as follows:  13 EXAMINATION  14 BY MS. DAVIDSON:  15 Q. Good morning, Dr. Clarke-Pearson. It's  16 nice to meet you. I understand you've been deposed  17 before. We've got a lot of ground to cover today,  18 so I'm not going to go into the basics of a  19 deposition. But, basically, if you need a break,  20 let me know, and please provide verbal answers to  21 every question. Okay?  22 A. Okay.  23 Q. Can you state your full name for the  24 record?  25 A. Daniel Lyle Clarke-Pearson.</p>	<p style="text-align: right;">Page 8</p> <p>1 Q. And when you say "our attorneys," who  2 are you referring to?  3 A. I'm talking about Ms. O'Dell.  4 Q. And you said you have specific epi  5 papers. Who put those together?  6 A. I did.  7 Q. And do you have any notes on those epi  8 papers?  9 A. Yes.  10 Q. Have you produced those notes to us?  11 A. Not that I'm aware of.  12 MS. DAVIDSON: I'm going to request  13 that those notes be produced to us, either  14 during a break or if they are not produced  15 to us until after the deposition, I'm going  16 to have to hold the deposition open. We --  17 THE WITNESS: Sorry, I can't hear you.  18 MS. DAVIDSON: -- don't have any  19 notes --  20 MS. O'DELL: We can't hear you,  21 Jessica, I'm sorry. Would you mind  22 repeating it?  23 MS. DAVIDSON: We did not receive any  24 notes that Dr. Clarke-Pearson had on any epi  25 papers. So I need to ask for those to be</p>
<p style="text-align: right;">Page 7</p> <p>1 Q. And, Dr. Clarke-Pearson, where are you  2 testifying from today?  3 A. I'm in Chapel Hill, North Carolina, at  4 the Carolina Inn.  5 Q. Do you still reside in North Carolina?  6 A. Yes.  7 Q. Do you have any materials with you  8 today?  9 A. Yes.  10 Q. Can you please tell me what you have  11 with you?  12 A. Oh, my. Predominantly publications  13 that have been listed in my reports. I have my  14 reports. I have Dr. Longo's reports. I have some  15 specific epidemiology papers. I have a  16 reviewers -- document of reviewers looking at a  17 paper Dr. Saed wrote. I have a list of all my  18 materials considered. Two binders that have all  19 those -- all those publications, those papers and  20 materials adjacent to my table here. I have  21 invoices that I've submitted since the last  22 deposition. I believe that covers it -- covers it.  23 Q. Who prepared the binders of  24 publications and papers?  25 A. Our attorneys did.</p>	<p style="text-align: right;">Page 9</p> <p>1 produced. I don't know if those can be  2 produced during today's deposition or we'll  3 have to hold the deposition open.  4 MS. O'DELL: I mean, I think you're --  5 you're welcome to ask him about his notes  6 and you're welcome to mark the papers. And  7 Dr. Clarke-Pearson will be happy to walk you  8 through any notes that he has. To my  9 knowledge, they're very limited. And then  10 you can ask him about them.  11 Happy to have those -- copies of those  12 papers marked as exhibits to the deposition,  13 but we will not agree to hold the deposition  14 open.  15 MS. DAVIDSON: Well, because the  16 deposition is remote, I don't have an  17 ability to see those notes to question about  18 them, and I believe they should have been  19 produced before. Those notes are subject to  20 production under Rule 26.  21 So we're going to need to get those,  22 and I'll have to take a look and see if we  23 need to ask further questions. So we will  24 be holding the deposition open. You can  25 object to that.</p>

<p style="text-align: right;">Page 10</p> <p>1 MS. O'DELL: We will object to that.                  2 And, certainly, it was your decision to                  3 conduct the deposition remotely. There was                  4 no order to do that. You certainly could                  5 have been here in person if you had chosen                  6 and made the election not to do that. So we                  7 we'll try to address this, Jessica. Let's                  8 just proceed. We aren't going to agree.                  9 BY MS. DAVIDSON:                  10 Q. Dr. Clarke-Pearson, how did you prepare                  11 for your deposition?                  12 A. It's been going on for a while. I've                  13 been reviewing materials that -- that I've listed                  14 and reviewed my reports, my general report as well                  15 as reports from my patients. I've reviewed                  16 literature that I thought might be useful in this                  17 deposition. I think that's the core of what I've                  18 done over the last couple of weeks in preparing for                  19 this deposition.                  20 Q. Did you meet with counsel to prepare                  21 for the deposition?                  22 A. I have.                  23 Q. Whom did you meet with?                  24 A. Ms. O'Dell and Dr. Thompson.                  25 Q. When did you meet with them?</p>	<p style="text-align: right;">Page 12</p> <p>1 Q. You were deposed in August 2021. Do                  2 you recall that?                  3 A. Yes.                  4 Q. When is the last time you looked at                  5 that deposition testimony?                  6 A. I may have scanned it shortly after the                  7 deposition when it became available to me. That                  8 would be the last time.                  9 Q. You were also deposed in 2019, correct,                  10 in the MDL?                  11 A. Yes.                  12 Q. And when is the last time you took a                  13 look at that deposition?                  14 A. I don't recall.                  15 Q. Do you stand by all the testimony that                  16 you gave in 2019?                  17 A. Yes.                  18 Q. And do you stand by all the testimony                  19 that you gave in August 2021?                  20 A. Yes.                  21 Q. Is there any testimony from either                  22 deposition that you wish to change?                  23 A. Not that I'm aware of.                  24 Q. Did Ms. O'Dell and Ms. Thompson show                  25 you any documents to prepare for this deposition?</p>
<p style="text-align: right;">Page 11</p> <p>1 A. I'm sorry, again, I didn't hear you.                  2 Q. When did you meet with them?                  3 A. I met with them yesterday.                  4 Q. For how long?                  5 A. Approximately five hours.                  6 Q. Have you had any other meetings with                  7 them in the last few months?                  8 A. We've had a Zoom meeting. I'm not sure                  9 when it was. Within the last two weeks.                  10 Q. How many Zoom meetings?                  11 A. I believe just one.                  12 Q. And how long did that last?                  13 A. A few hours.                  14 Q. Was that also to prepare for the                  15 deposition?                  16 A. Yes.                  17 Q. Have you had any other meetings, calls,                  18 or Zooms to prepare for the deposition?                  19 A. Can you give me a time frame?                  20 Q. For this deposition?                  21 A. For this deposition. No, I don't think                  22 so.                  23 Q. Did you review your prior depositions                  24 to prepare for this deposition?                  25 A. No, I haven't.</p>	<p style="text-align: right;">Page 13</p> <p>1 MS. DAVIDSON: You can answer that                  2 question if you were shown or were not                  3 shown, but not the substance of what was                  4 discussed or what was shown.                  5 THE WITNESS: Other than one document                  6 that I recall is different than documents                  7 that I would have had already was the                  8 journal reviewer's comments about Dr. Saed's                  9 paper.                  10 BY MS. DAVIDSON:                  11 Q. You produced three invoices to us this                  12 week. Do you know that?                  13 A. I'm sorry, the fire truck just went by                  14 here. Let me -- can you repeat that? I didn't                  15 hear you.                  16 Q. Are you aware that you produced three                  17 invoices to defendants this week?                  18 A. I produced invoices. They're here.                  19 I'm not sure there are three.                  20 MS. DAVIDSON: All right. Let's mark                  21 those.                  22 MS. O'DELL: Are you marking them all                  23 as one exhibit, Jessica, or are you going to                  24 mark them individually?                  25 MS. DAVIDSON: Asher?</p>

<p style="text-align: right;">Page 14</p> <p>1 MR. TRANGLE: Yes.</p> <p>2 MS. DAVIDSON: You're marking</p> <p>3 collectively --</p> <p>4 MR. TRANGLE: Right.</p> <p>5 MS. DAVIDSON: -- all the three</p> <p>6 invoices we got this week; is that correct?</p> <p>7 MR. TRANGLE: Correct.</p> <p>8 MS. DAVIDSON: Okay. So let's mark</p> <p>9 those as Exhibit 1. And in order to make</p> <p>10 this easier, I created a demonstrative. So</p> <p>11 let's mark as Exhibit 2 the summary of the</p> <p>12 invoices.</p> <p>13 (Exhibits 1 and 2 marked for</p> <p>14 identification.)</p> <p>15 MS. DAVIDSON: Thanks Asher.</p> <p>16 BY MS. DAVIDSON:</p> <p>17 Q. So this document shows the five</p> <p>18 invoices we received in the past from you and the</p> <p>19 most recent three invoices, and my math is kind of</p> <p>20 lousy --</p> <p>21 MS. O'DELL: Jessica --</p> <p>22 MS. DAVIDSON: Both my math and my eyes</p> <p>23 are lousy.</p> <p>24 MS. O'DELL: -- Dr. Clarke-Pearson</p> <p>25 asked if it could be made bigger, Jessica.</p>	<p style="text-align: right;">Page 16</p> <p>1 A. No. This includes work up until</p> <p>2 December 31st, 2023.</p> <p>3 Q. About how many hours would you say</p> <p>4 you've worked since December 31?</p> <p>5 A. Well, I don't like to guess in a</p> <p>6 deposition, so I can't tell you for sure.</p> <p>7 Q. Would it be more or less than 50 hours?</p> <p>8 A. Probably more than 50 hours.</p> <p>9 Q. Would it be more or less than</p> <p>10 100 hours?</p> <p>11 A. Probably less.</p> <p>12 Q. Okay. So somewhere between 50 hours</p> <p>13 and 100 hours of unbilled time. When do you plan</p> <p>14 to submit those bills?</p> <p>15 A. After this deposition.</p> <p>16 Q. All right. I'm going to request on the</p> <p>17 record that that invoice be produced to us.</p> <p>18 Dr. Clarke-Pearson, did you somewhere</p> <p>19 between October and December -- October 2021 and</p> <p>20 December 2023 raise your rate from 800 to 900</p> <p>21 dollars an hour?</p> <p>22 A. Yes, I did.</p> <p>23 Q. When did you do that?</p> <p>24 A. I don't remember specifically.</p> <p>25 Q. And, Dr. Clarke-Pearson, what</p>
<p style="text-align: right;">Page 15</p> <p>1 So, Asher, if you could do that. Thank</p> <p>2 you.</p> <p>3 And then, secondly, would you mind</p> <p>4 putting this document in the chat.</p> <p>5 MR. TRANGLE: Sure.</p> <p>6 MS. O'DELL: Thank you.</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. Dr. Clarke-Pearson, this shows about</p> <p>9 \$125,000.</p> <p>10 MS. O'DELL: I'm sorry, we don't know</p> <p>11 where you're looking at, Jessica, if you --</p> <p>12 MS. DAVIDSON: You didn't let me finish</p> <p>13 my question, Leigh. Maybe just wait until</p> <p>14 I'm done with my question.</p> <p>15 MS. O'DELL: I'm sorry. Please</p> <p>16 proceed.</p> <p>17 MS. DAVIDSON: I was in the middle of</p> <p>18 the question. Let's just start the question</p> <p>19 again.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. Dr. Clarke-Pearson, for invoices 6, 7,</p> <p>22 and 8 in total, this shows about \$128,000. Does</p> <p>23 this reflect all the work you've done since</p> <p>24 August 20 -- August -- I guess we'd say August 1,</p> <p>25 2021?</p>	<p style="text-align: right;">Page 17</p> <p>1 percentage of your income would you say is derived</p> <p>2 from expert testimony?</p> <p>3 A. Well, I'm retired at this point in</p> <p>4 time. So my income is quite different than it was</p> <p>5 when I was in practice and working at the</p> <p>6 university. So I still work at the university but</p> <p>7 on a very reduced salary.</p> <p>8 In the past, my income from</p> <p>9 medical-legal work was approximately about</p> <p>10 10 percent of my salary. I can't give you an exact</p> <p>11 number now that I'm retired and living on Social</p> <p>12 Security and a pension and some other mandatory</p> <p>13 deductions from my retirement accounts.</p> <p>14 Q. Fair to say that now that you're</p> <p>15 retired it's significantly more than 10 percent?</p> <p>16 MS. O'DELL: Object to the form.</p> <p>17 Excuse me. Object to the form.</p> <p>18 THE WITNESS: It's more than</p> <p>19 10 percent, yes.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. Can you estimate about what percentage</p> <p>22 it is?</p> <p>23 A. No, I really can't.</p> <p>24 Q. Is it more than 25 percent?</p> <p>25 A. It may be.</p>

<p style="text-align: right;">Page 18</p> <p>1 Q. Is it more than 50 percent?</p> <p>2 A. I don't think so.</p> <p>3 Q. So is your best estimate that it's</p> <p>4 somewhere between 25 and 50 percent of your income</p> <p>5 currently is from expert work?</p> <p>6 MS. O'DELL: Object to the form.</p> <p>7 THE WITNESS: I just can't give you a</p> <p>8 specific number. I'm sorry.</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. Do you know what your annual earnings</p> <p>11 are from your pension?</p> <p>12 MS. O'DELL: Object. He's not --</p> <p>13 you're not entitled to know that</p> <p>14 information, Jessica. So I would object to</p> <p>15 the question.</p> <p>16 And, Dr. Clarke-Pearson, you don't have</p> <p>17 to respond to that.</p> <p>18 MS. DAVIDSON: I am trying to determine</p> <p>19 what percentage of his income comes from</p> <p>20 expert work which is a completely</p> <p>21 appropriate question. In order to determine</p> <p>22 that, I need to know how much his pension</p> <p>23 is.</p> <p>24 MS. O'DELL: No, Jessica. I mean, he's</p> <p>25 given you his best estimate of the</p>	<p style="text-align: right;">Page 20</p> <p>1 MS. O'DELL: Same instruction,</p> <p>2 Dr. Clarke-Pearson.</p> <p>3 MS. DAVIDSON: I'm asking him simply if</p> <p>4 he knows.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Do you know how much your pension is</p> <p>7 per year? I'm not asking what it is.</p> <p>8 MS. O'DELL: I don't know what you mean</p> <p>9 by the question what's his pension per year,</p> <p>10 Jessica. But, you know, Dr. Clarke-Pearson,</p> <p>11 what he knows or what he doesn't know about</p> <p>12 his pension, retirement, et cetera are not</p> <p>13 appropriate subject matter for this</p> <p>14 deposition. And he has testified to your</p> <p>15 questions about percentages to the best of</p> <p>16 his knowledge.</p> <p>17 MS. DAVIDSON: Well, he said he doesn't</p> <p>18 know and, therefore, I'd like to know if he</p> <p>19 knows his pension because if he knows his</p> <p>20 pension, then he does know what percentage</p> <p>21 it is.</p> <p>22 MS. O'DELL: I don't think that's what</p> <p>23 he said. He gave you his estimate.</p> <p>24 MS. DAVIDSON: He did not.</p> <p>25 MS. O'DELL: Yes, he did.</p>
<p style="text-align: right;">Page 19</p> <p>1 percentage, and he's testified to that.</p> <p>2 You're not entitled to walk through, you</p> <p>3 know, his retirement accounts or any of that</p> <p>4 information. You know, that's not subject</p> <p>5 to disclosure. What you're entitled to know</p> <p>6 is how much he's been paid for this work in</p> <p>7 this case, which we've provided that</p> <p>8 information to you and he's testified to.</p> <p>9 And so we would object to the questions</p> <p>10 about his assets.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. Dr. Clarke-Pearson, are you refusing to</p> <p>13 testify to what percentage of your income comes</p> <p>14 from expert work?</p> <p>15 MS. O'DELL: So to be clear,</p> <p>16 Dr. Clarke-Pearson has already responded to</p> <p>17 your questions. And Dr. Clarke-Pearson is</p> <p>18 here to answer your questions that are</p> <p>19 appropriate under the rules. And asking him</p> <p>20 about the value of his retirement, his other</p> <p>21 assets. Those questions are inappropriate.</p> <p>22 So I've instructed him not to answer.</p> <p>23 BY MS. DAVIDSON:</p> <p>24 Q. Dr. Clarke-Pearson, do you know how</p> <p>25 much your pension is per year?</p>	<p style="text-align: right;">Page 21</p> <p>1 MS. DAVIDSON: Leigh, are you going to</p> <p>2 let me take this deposition?</p> <p>3 MS. O'DELL: I am. But I am --</p> <p>4 absolutely --</p> <p>5 MS. DAVIDSON: Instructing --</p> <p>6 MS. O'DELL: Don't interrupt me. Let's</p> <p>7 just start off -- start the day well.</p> <p>8 MS. DAVIDSON: You're interrupting my</p> <p>9 questions.</p> <p>10 MS. O'DELL: Don't interrupt me. What</p> <p>11 I said to him is he's given you his estimate</p> <p>12 of the appropriate -- his estimate of the</p> <p>13 percentage of his current income to the best</p> <p>14 of his knowledge. You're not entitled to</p> <p>15 know other information about his retirement,</p> <p>16 et cetera, as I've stated.</p> <p>17 BY MS. DAVIDSON:</p> <p>18 Q. Dr. Clarke-Pearson, Ms. O'Dell has</p> <p>19 represented that you told me what percentage of</p> <p>20 your current income is from expert work. What</p> <p>21 percentage is that? Because I didn't hear an</p> <p>22 answer.</p> <p>23 MS. O'DELL: He gave an estimate</p> <p>24 previously. Dr. Clarke-Pearson, if you want</p> <p>25 to repeat the previous testimony you've</p>



<p style="text-align: right;">Page 22</p> <p>1 given about your best information, you may</p> <p>2 about a percentage, but other information</p> <p>3 they're not entitled to.</p> <p>4 THE WITNESS: I think my response to</p> <p>5 you was within a range. The court reporter</p> <p>6 might want to read back what I said.</p> <p>7 MS. DAVIDSON: I'm sorry,</p> <p>8 Dr. Clarke-Pearson, I couldn't hear you.</p> <p>9 THE WITNESS: I said I gave you a</p> <p>10 range. 25 percent was some number you threw</p> <p>11 out there, and I said it was probably close</p> <p>12 to that. The court reporter could probably</p> <p>13 read back specifically what I said.</p> <p>14 BY MS. DAVIDSON:</p> <p>15 Q. Dr. Clarke-Pearson, if I ask a</p> <p>16 question, I am entitled to an answer rather than</p> <p>17 asking the court reporter to repeat your testimony.</p> <p>18 Are you testifying that it's</p> <p>19 approximately 25 percent of your income that comes</p> <p>20 currently from expert work?</p> <p>21 A. I don't know exactly what it is.</p> <p>22 Q. I understand you don't know exactly</p> <p>23 what it is, but is it approximately 25 percent or</p> <p>24 more than 25 percent?</p> <p>25 A. I don't know.</p>	<p style="text-align: right;">Page 24</p> <p>1 I don't recall any other travel except</p> <p>2 around Chapel Hill here in North Carolina.</p> <p>3 Q. Does counsel play -- for plaintiffs pay</p> <p>4 for your travel?</p> <p>5 A. Yes, I think so.</p> <p>6 Q. Do you have any requirements with</p> <p>7 respect to travel?</p> <p>8 MS. O'DELL: Object to the form.</p> <p>9 Vague. I mean, what do you mean by</p> <p>10 requirements?</p> <p>11 And I'm not sure I understand the</p> <p>12 question.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. Dr. Clarke-Pearson, do you fly first</p> <p>15 class?</p> <p>16 A. That is a request that's on my fee</p> <p>17 schedule, yes.</p> <p>18 Q. Asher, if you could put up the invoice</p> <p>19 from October 14, 2021, which was part of Exhibit 1.</p> <p>20 Dr. Clarke-Pearson, do you know why there's</p> <p>21 redactions on this invoice?</p> <p>22 A. No, I don't.</p> <p>23 MS. O'DELL: I'll represent, Jessica,</p> <p>24 that redaction relates to a case in which</p> <p>25 Dr. Clarke-Pearson is not disclosed as an</p>
<p style="text-align: right;">Page 23</p> <p>1 Q. Have you had to travel for this</p> <p>2 litigation?</p> <p>3 A. With regard to this deposition?</p> <p>4 Q. Have you had to travel at all with</p> <p>5 respect to your MDL work?</p> <p>6 A. Yes.</p> <p>7 MS. O'DELL: At any point in time,</p> <p>8 Jessica? I'm just trying to understand what</p> <p>9 your question is.</p> <p>10 MS. DAVIDSON: Dr. Clarke-Pearson</p> <p>11 understood the question and he said yes.</p> <p>12 BY MS. DAVIDSON:</p> <p>13 Q. When did you travel for the MDL</p> <p>14 proceeding?</p> <p>15 MS. O'DELL: You're free to answer the</p> <p>16 question.</p> <p>17 THE WITNESS: As best I recall, I went</p> <p>18 to -- I think we stayed in Princeton, New</p> <p>19 Jersey, and went to federal court in the MDL</p> <p>20 case. I don't know the exact dates.</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. Does counsel for -- sorry, I thought</p> <p>23 you were done.</p> <p>24 A. Sorry, you too. I stopped for a</p> <p>25 moment.</p>	<p style="text-align: right;">Page 25</p> <p>1 expert. He consulted.</p> <p>2 So you're not entitled to that</p> <p>3 information. But, certainly, we provided</p> <p>4 the number of hours extended as well as the</p> <p>5 total bill.</p> <p>6 BY MS. DAVIDSON:</p> <p>7 Q. Dr. Clarke-Pearson --</p> <p>8 MS. O'DELL: Excuse me, Jessica, I'm</p> <p>9 sorry.</p> <p>10 MS. DAVIDSON: I'm sorry, Leigh.</p> <p>11 MS. O'DELL: I'm sorry. There was just</p> <p>12 a little feedback here. I'm just asking if</p> <p>13 there was something on. Okay. Sorry about</p> <p>14 that.</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. Dr. Clarke-Pearson, what are the</p> <p>17 Callahan and Baker cases that are referenced on</p> <p>18 this sheet?</p> <p>19 A. Yeah, I see what you're saying. I</p> <p>20 honestly don't recall. Been so focused on this</p> <p>21 case that I don't recall these cases that I did a</p> <p>22 little bit of work on.</p> <p>23 Q. And, Dr. Clarke-Pearson, in your expert</p> <p>24 report submitted on November 2023, you stated that</p> <p>25 your rate is the \$800 per hour. Is that an error?</p>



<p style="text-align: right;">Page 26</p> <p>1 A. That's an error. Currently, it's \$900</p> <p>2 an hour.</p> <p>3 Q. And why did you raise your rate?</p> <p>4 A. Just like other things in the economy,</p> <p>5 my rate is moving with inflation, I suppose, you</p> <p>6 know, best way to describe it.</p> <p>7 Q. Do you do any expert work for anyone</p> <p>8 other than Ms. O'Dell, Ms. Thompson, and</p> <p>9 Ms. Parfitt?</p> <p>10 A. Yes.</p> <p>11 Q. What other expert work do you do?</p> <p>12 A. Not product liability, but other</p> <p>13 medical malpractice issues.</p> <p>14 Q. Have you appeared as an expert in any</p> <p>15 medical malpractice cases in the last four years?</p> <p>16 A. To the extent you mean appear by</p> <p>17 deposition, court? What do you mean by that?</p> <p>18 Q. Either.</p> <p>19 A. In the last four years, I don't believe</p> <p>20 I've had any depositions. I've just been</p> <p>21 consulting with attorneys.</p> <p>22 Q. In the last four years, has all of your</p> <p>23 expert income come from the talc litigation?</p> <p>24 A. Can I correct what I just said a minute</p> <p>25 ago to your last question? I did have a deposition</p>	<p style="text-align: right;">Page 28</p> <p>1 I may have started working with that attorney when</p> <p>2 I was at \$800 an hour. I'd have to check my</p> <p>3 records to be sure. It may well be \$800 an hour.</p> <p>4 Q. So in the middle of that proceeding,</p> <p>5 you didn't raise your rates?</p> <p>6 MS. O'DELL: Object to the form.</p> <p>7 THE WITNESS: I stayed with the rate</p> <p>8 that I offered to work for this attorney</p> <p>9 when I originally was engaged.</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. In the talc matter, however, you didn't</p> <p>12 stay with your rate; is that correct?</p> <p>13 A. I didn't stay with the rate. I got</p> <p>14 approval from Ms. O'Dell to increase my rate.</p> <p>15 Q. Were you retained in Albright by the</p> <p>16 plaintiff or by the defendant?</p> <p>17 A. By the defendant.</p> <p>18 Q. Who was the defendant?</p> <p>19 A. I can't remember specifics. It was a</p> <p>20 nurse practitioner and a physician that worked in a</p> <p>21 clinic affiliated with Barnes-Jewish Hospital in</p> <p>22 St. Louis, Washington University.</p> <p>23 Q. Did you conclude that the Pap smear had</p> <p>24 been normal?</p> <p>25 A. I'm sorry?</p>
<p style="text-align: right;">Page 27</p> <p>1 recently within the past month. Lasted for about</p> <p>2 two hours.</p> <p>3 MS. DAVIDSON: I do not believe that</p> <p>4 was disclosed, Leigh. So I would request</p> <p>5 that you amend his disclosure.</p> <p>6 BY MS. DAVIDSON:</p> <p>7 Q. What was that deposition in?</p> <p>8 A. I'm sorry.</p> <p>9 Q. What was the case where you were</p> <p>10 deposed?</p> <p>11 A. I believe it was the Albright case in</p> <p>12 St. Louis.</p> <p>13 Q. What does that case involve?</p> <p>14 A. What does that case involve?</p> <p>15 Q. I'm sorry, I didn't hear --</p> <p>16 A. It involves an abnormal Pap smear that</p> <p>17 the patient alleges was not reported to her.</p> <p>18 Q. Did the patient have cancer?</p> <p>19 A. She ultimately developed cancer</p> <p>20 18 months after her Pap smear.</p> <p>21 Q. What kind of cancer?</p> <p>22 A. Cervical cancer.</p> <p>23 Q. Were you paid \$900 an hour for that</p> <p>24 matter?</p> <p>25 A. Yes. But I correct that, I'm not sure.</p>	<p style="text-align: right;">Page 29</p> <p>1 Q. Did you conclude that the Pap smear</p> <p>2 was, in fact, normal?</p> <p>3 A. No, it wasn't normal. I concluded</p> <p>4 based on what I read on the Pap smear report.</p> <p>5 Q. So what was the substance of your</p> <p>6 expert opinion there?</p> <p>7 A. So the patient had an abnormal Pap</p> <p>8 smear that showed some precancerous changes on her</p> <p>9 Pap smear and HPV, human papillomavirus of high</p> <p>10 risk types. And the allegation is that the patient</p> <p>11 was never informed about that. There's evidence</p> <p>12 that the nurse practitioner who obtained the Pap</p> <p>13 smear tried to communicate with the patient by way</p> <p>14 of telephone and left a phone message and also</p> <p>15 tried to communicate by -- through their medical</p> <p>16 record which is Epic through MyChart, sent a</p> <p>17 message in MyChart to the patient, and the patient</p> <p>18 never responded to either one of those attempts at</p> <p>19 communication.</p> <p>20 MS. O'DELL: Dr. Clarke-Pearson, when</p> <p>21 you say "MyChart," do you mean your chart or</p> <p>22 what is that? That may be confusing.</p> <p>23 THE WITNESS: Sure. MyChart is a</p> <p>24 software piece in the Epic, the electronic</p> <p>25 medical record that communicates.</p>

<p style="text-align: right;">Page 30</p> <p>1 MS. DAVIDSON: I understood. MyChart,  2 capital M, capital C, Leigh.  3 THE WITNESS: Okay.  4 BY MS. DAVIDSON:  5 Q. Okay. Have you published any papers  6 related to talc since 2021?  7 A. No.  8 Q. Have you made any public statements  9 concerning talc and ovarian cancer since 2021?  10 A. No.  11 Q. Have you spoken in a public forum about  12 talc and ovarian cancer since 2021?  13 A. I lecture -- I don't lecture. I talk  14 to the medical students, it's a case-based  15 discussion every -- nearly every week as part of my  16 teaching responsibilities. And in the course of  17 those discussions, talcum powder is raised as part  18 of a discussion.  19 Q. Do you use slides for those  20 presentations?  21 A. No, I don't. It's a case-based  22 discussion. The students are given a case to  23 review and about a dozen to 15 questions for them  24 to answer, and then we have a Zoom gathering where  25 I ask them to answer the questions that I've posed.</p>	<p style="text-align: right;">Page 32</p> <p>1 the patient that I have hypothetically is I think  2 in her sixties. But there are many other risk  3 factors that are not part of that particular case,  4 but then I ask the students to expand on what other  5 risk factors could the patient possibly have.  6 Q. My question is do you state in the case  7 that the patient used talcum powder?  8 A. No.  9 Q. When did you start talking about talcum  10 powder as a risk factor to medical students?  11 A. I'm not sure I know when. I can't give  12 you a date.  13 Q. Was it before or after you were  14 retained in this litigation?  15 A. It was probably before I was retained  16 in this litigation. But as has been discussed in a  17 prior deposition, I became retained after I became  18 better educated about talcum powder by reviewing  19 literature at the time.  20 Q. You were -- sorry.  21 A. The literature that I was not aware of  22 to begin with.  23 Q. You were retained in this litigation in  24 2018; correct?  25 A. I believe so, yes.</p>
<p style="text-align: right;">Page 31</p> <p>1 So one of those questions is what are the risk  2 factors for ovarian cancer. And the student  3 oftentimes will -- I'm not sure what percentage,  4 sometimes they'll bring up talcum powder as one of  5 the risk factors that they've identified in their  6 research and preparing for my conference.  7 And other times they'll go to the point  8 of talking about tubal ligation being a -- and  9 hysterectomy being a risk-reducing procedure. And  10 we then -- or I will then say -- and inform them  11 about talcum powder being a risk factor as well.  12 Q. When you say there's a case, is it a  13 case of a real person?  14 A. No, it's a hypothetical case so I can  15 get the main points of what I want them to learn.  16 So it's a case I've made up.  17 Q. Does the hypothetical plaintiff -- has  18 the hypothetical plaintiff used talcum powder?  19 MS. O'DELL: Objection to form.  20 Patient, not plaintiff.  21 BY MS. DAVIDSON:  22 Q. Has the hypothetical --  23 A. The hypothetical patient has ovarian  24 cancer. And some of those risk factors are  25 included based, you know, for example, the age of</p>	<p style="text-align: right;">Page 33</p> <p>1 Q. Is it your testimony that you discussed  2 talcum powder as a risk factor for ovarian cancer  3 with medical students before 2018?  4 MS. O'DELL: Jessica, I just object to  5 this questioning. The purpose of this  6 deposition is to ask questions about what's  7 occurred since his last deposition,  8 August 2021. He was asked questions about  9 what he was telling students and others in  10 2018 -- before 2018 in his first deposition.  11 And so we just ask you to focus on activity  12 after August 2021.  13 BY MS. DAVIDSON:  14 Q. Dr. Clarke-Pearson, you can answer the  15 question.  16 A. I don't --  17 MS. O'DELL: Would you repeat it or  18 have Jessica, please. I'm not sure I  19 remember it. Dr. Clarke-Pearson may not  20 either.  21 MS. DAVIDSON: Court reporter, can you  22 repeat my question.  23 (The reporter read the last question.)  24 THE WITNESS: I don't recall when I  25 started talking to medical students about</p>

<p style="text-align: right;">Page 34</p> <p>1 talcum powder per se. I'm sorry --</p> <p>2 MS. O'DELL: You guys, can we go off</p> <p>3 the record just for a moment? We need to</p> <p>4 check the power cord for Dr. Clarke-Pearson,</p> <p>5 so let's go off the record.</p> <p>6 (Recess taken from 9:37 a.m. until 9:38 a.m.)</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. Dr. Clarke-Pearson, have you made any</p> <p>9 public statements about asbestos and ovarian cancer</p> <p>10 since August 2021?</p> <p>11 A. Not that I'm aware of.</p> <p>12 Q. Have you spoken in any public forum</p> <p>13 about asbestos and ovarian cancer since</p> <p>14 August 2021?</p> <p>15 A. No.</p> <p>16 Q. Do you recall giving a speech at Duke</p> <p>17 earlier this year entitled "Reflections on</p> <p>18 Gynecologic Oncology at Duke: Lessons Learned"?</p> <p>19 A. Yes.</p> <p>20 Q. Did you mention talc during this</p> <p>21 lecture?</p> <p>22 A. The lecture had nothing to do with</p> <p>23 ovarian cancer.</p> <p>24 Q. Is it your testimony that you didn't</p> <p>25 address ovarian cancer in that lecture?</p>	<p style="text-align: right;">Page 36</p> <p>1 Q. Are you working on any articles or</p> <p>2 studies that pertain to asbestos or talcum powder?</p> <p>3 A. No.</p> <p>4 Q. Do you still see patients?</p> <p>5 A. No, I don't.</p> <p>6 Q. When did you stop seeing patients?</p> <p>7 A. Approximately March of 2020.</p> <p>8 Q. March 2020?</p> <p>9 A. Yes. I may have continued. I'm not</p> <p>10 sure the exact end date of the last time I</p> <p>11 interacted with a patient in the clinical setting.</p> <p>12 It may have been a few months later. We were doing</p> <p>13 Zoom virtual visits with patients after March of</p> <p>14 2020. I was still doing some of that, but I can't</p> <p>15 recall exactly when my last Zoom session was with a</p> <p>16 patient.</p> <p>17 Q. Do you still teach any classes?</p> <p>18 A. Yes. I teach medical students like</p> <p>19 I've talked about before. I also teach residents</p> <p>20 and fellows in gynecologic oncology and residents</p> <p>21 in obstetrics and gynecology at UNC.</p> <p>22 Q. As part of training residents, you</p> <p>23 don't see patients with them?</p> <p>24 A. I stopped doing clinical work when I</p> <p>25 was -- when the pandemic hit, and I had a medical</p>
<p style="text-align: right;">Page 35</p> <p>1 A. We may have talked about the research</p> <p>2 that was done at Duke over the 50 years that I was</p> <p>3 reviewing. I'm sure there was some discussion</p> <p>4 about notation of clinical trials that we</p> <p>5 participated in that we have looked at other</p> <p>6 treatments -- new treatments for ovarian cancer.</p> <p>7 I'm not aware I had any discussion about risk</p> <p>8 factors for ovarian cancer, including talcum</p> <p>9 powder.</p> <p>10 Q. Did you discuss the BRCA1 gene in that</p> <p>11 lecture?</p> <p>12 A. I may have. That was a discovery that</p> <p>13 some of my colleagues at Duke made. So that was a</p> <p>14 contribution to what Duke had contributed -- had</p> <p>15 made to the oncology.</p> <p>16 Q. Did you mention 12 genetic variants</p> <p>17 known to increase the risk of developing epithelial</p> <p>18 ovarian cancer in that lecture?</p> <p>19 A. I don't recall that, no.</p> <p>20 Q. Did you mention asbestos in that</p> <p>21 lecture?</p> <p>22 A. I don't believe I did.</p> <p>23 Q. Do you have any forthcoming speeches or</p> <p>24 presentations that relate to talcum powder?</p> <p>25 A. Not that I'm aware of.</p>	<p style="text-align: right;">Page 37</p> <p>1 condition, which we don't need to talk about, that</p> <p>2 put me at high risk to develop COVID, and I was --</p> <p>3 decided to stop doing clinical work. I was in my</p> <p>4 70s and felt like I had given it a good run in the</p> <p>5 time that I provided care to patients and decided</p> <p>6 it was time to stop the clinical work and</p> <p>7 interacting with patients.</p> <p>8 Q. So how do you train residents?</p> <p>9 A. I give lectures. I do case-based</p> <p>10 discussions. I mentor them. I've done some</p> <p>11 collaboration with some publications that they were</p> <p>12 working on. So that's sort of training them. Not</p> <p>13 teaching them how to do surgery anymore. Although,</p> <p>14 I do actually, now that you brought that up, on a</p> <p>15 consistent basis, approximately every six weeks, I</p> <p>16 work with two other faculty members face to face</p> <p>17 with the residents in a simulation lab to teach</p> <p>18 them how to do a hysterectomy.</p> <p>19 Q. In August 2021 when you said you still</p> <p>20 saw patients, was that erroneous?</p> <p>21 A. That would have been a mistake if</p> <p>22 that's what I said.</p> <p>23 Q. Do you -- when you speak to med</p> <p>24 students about talc being a risk factor for ovarian</p> <p>25 cancer, do you tell the med students that you are a</p>

<p style="text-align: right;">Page 38</p> <p>1 paid expert for plaintiffs in talc litigation?</p> <p>2 A. That doesn't usually come up, no.</p> <p>3 Q. Do you tell --</p> <p>4 A. Sometimes it does. Sometimes it does.</p> <p>5 Q. What do you mean by sometimes it does?</p> <p>6 A. Sometimes -- sorry. Sometimes I will</p> <p>7 happen to bring that up in part of the</p> <p>8 conversation.</p> <p>9 Q. Do you have a practice of always</p> <p>10 letting students know that you're an expert in talc</p> <p>11 litigation if the subject of talc comes up?</p> <p>12 A. No, I don't.</p> <p>13 Q. Do you tell residents that talc is a</p> <p>14 risk factor for ovarian cancer?</p> <p>15 A. I'm not sure I've had that discussion</p> <p>16 with the residents.</p> <p>17 Q. Is it still the case that you have</p> <p>18 never told a patient that their ovarian cancer was</p> <p>19 caused by talc use?</p> <p>20 A. I'm sorry, I didn't hear your question.</p> <p>21 Q. Is it still the case that you have</p> <p>22 never told a patient that their ovarian cancer was</p> <p>23 caused by talc use?</p> <p>24 MS. O'DELL: Object to form.</p> <p>25 THE WITNESS: Yes, I think I've said</p>	<p style="text-align: right;">Page 40</p> <p>1 ovarian cancer if she had not used talc?</p> <p>2 MS. O'DELL: Object to the form. It's</p> <p>3 a double negative.</p> <p>4 THE WITNESS: I know that if she used</p> <p>5 talcum powder, she would be at higher risk.</p> <p>6 And I would -- if she used talcum powder to</p> <p>7 be a cause -- as part of the cause for her</p> <p>8 ovarian cancer. If she didn't use talcum</p> <p>9 powder, she could still ovarian cancer, of</p> <p>10 course.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. You testified in August 2021 that you</p> <p>13 reached out to multiple people at ACOG to encourage</p> <p>14 them to issue a statement about talc use and</p> <p>15 ovarian cancer. Do you recall that?</p> <p>16 A. Yes, I do.</p> <p>17 Q. Have you reached out to ACOG since</p> <p>18 then?</p> <p>19 A. Yes, I have. I also reached out to the</p> <p>20 Society of Gynecologic Oncology leadership.</p> <p>21 Q. Let's mark as Exhibit 3 an October 15,</p> <p>22 2021, an e-mail from you to Maureen Phipps and</p> <p>23 Christopher Zahn. Who are Maureen Phipps and</p> <p>24 Christopher Zahn?</p> <p>25 MS. O'DELL: Just a moment.</p>
<p style="text-align: right;">Page 39</p> <p>1 that before. And I haven't seen patients</p> <p>2 since then, so I wouldn't have had that</p> <p>3 conversation.</p> <p>4 BY MS. DAVIDSON:</p> <p>5 Q. Is there a way to know today in 2024</p> <p>6 whether a woman who used talcum powder and</p> <p>7 developed ovarian cancer would not have developed</p> <p>8 ovarian cancer if she had not used talc?</p> <p>9 MS. O'DELL: You're coming in very</p> <p>10 faintly. Our speaker has not moved, but</p> <p>11 you're coming in very faintly. So would you</p> <p>12 mind repeating the question?</p> <p>13 MS. DAVIDSON: Court reporter, can you</p> <p>14 repeat the question just so we make sure</p> <p>15 it's worded exactly the same.</p> <p>16 (The reporter read the last question.)</p> <p>17 MS. O'DELL: Object to the form.</p> <p>18 THE WITNESS: I'm not sure, it seems</p> <p>19 like almost a double negative question</p> <p>20 you're asking me. Can you maybe restate it</p> <p>21 in some way?</p> <p>22 BY MS. DAVIDSON:</p> <p>23 Q. If a woman used talcum powder and</p> <p>24 developed ovarian cancer, is there a methodological</p> <p>25 way to know that she would not have developed that</p>	<p style="text-align: right;">Page 41</p> <p>1 THE WITNESS: Can I get the e-mails in</p> <p>2 front of me, please?</p> <p>3 (Exhibit 3 marked for identification.)</p> <p>4 BY MS. DAVIDSON:</p> <p>5 Q. Asher is going to put it up on the</p> <p>6 screen.</p> <p>7 Do you know without looking at the</p> <p>8 e-mail, though, who Maureen Phipps and Christopher</p> <p>9 Zahn are?</p> <p>10 A. Maureen Phipps is an</p> <p>11 obstetrician-gynecologist, who was at that point in</p> <p>12 time the CEO of the American College Obstetrics and</p> <p>13 Gynecology.</p> <p>14 Christopher Zahn, I'm not sure of his</p> <p>15 exact title, but he was, let's just say, the vice</p> <p>16 president for clinical affairs. I worked with him</p> <p>17 on several committees. Then I was active with ACOG</p> <p>18 leadership myself.</p> <p>19 Q. Do you recall an article that you sent</p> <p>20 them in October 15, 2021?</p> <p>21 A. I'm sorry, I'm looking at my e-mail</p> <p>22 here.</p> <p>23 Q. It's up on the screen.</p> <p>24 A. It's small. Let me look at this.</p> <p>25 MS. DAVIDSON: Here, Asher, you can</p>

<p style="text-align: right;">Page 42</p> <p>1 make it bigger. Asher, can you center it,  2 please.  3 MR. TRANGLE: It's centered on my  4 screen. Is it not?  5 MS. DAVIDSON: For me, the writing on  6 the right is cut off, maybe not for others.  7 THE WITNESS: I can see it. I would  8 have to go to the link to be sure what this  9 is. But I think it was indicating that the  10 FDA had found asbestos in Johnson &amp; Johnson  11 Baby Powder.  12 BY MS. DAVIDSON:  13 Q. This is a link to an article from Yahoo  14 Finance; correct?  15 A. I see there's a Yahoo --  16 Finance.Yahoo.com news. I'm not sure exactly what  17 it said.  18 MS. DAVIDSON: Asher, can we mark the  19 article as Exhibit 4.  20 (Exhibit 4 marked for identification.)  21 MS. O'DELL: Just for the record,  22 Jessica, was the e-mail that was displayed  23 on the screen, is that Exhibit 3? And is  24 that the only portion of Exhibit 3 is that  25 e-mail?</p>	<p style="text-align: right;">Page 44</p> <p>1 MS. DAVIDSON: Okay.  2 MS. O'DELL: Fair enough.  3 MS. DAVIDSON: Asher is also putting  4 every exhibit in the chat, Leigh.  5 MR. TRANGLE: I'll add that now. It's  6 just whatever you sent, Leigh, the whole  7 package of all the e-mails and that one PDF  8 that you guys sent over is the whole  9 exhibit.  10 MS. O'DELL: Thank you, Asher. That  11 was my question.  12 MS. DAVIDSON: Asher, can you put up  13 the Yahoo finance?  14 MR. TRANGLE: Yeah, can I put it up  15 now? I didn't know if we were ready.  16 MS. DAVIDSON: Yes, please.  17 MR. TRANGLE: Adding it now.  18 BY MS. DAVIDSON:  19 Q. Dr. Clarke-Pearson, you testified a  20 minute ago that you thought the article was about  21 the FDA. Is that what the article is about?  22 Can you read the -- can you read the  23 headline?  24 A. Certainly. It says, "J&amp;J puts talc  25 liabilities into bankruptcy."</p>
<p style="text-align: right;">Page 43</p> <p>1 MS. DAVIDSON: I marked that as  2 Exhibit 3. We'll be going back to it.  3 MS. O'DELL: Okay. I just wanted to  4 make sure that was the only document  5 included in Exhibit 3. Do I understand that  6 correctly?  7 Do I understand that correctly?  8 Jessica, there was one page shown on  9 the screen --  10 MS. DAVIDSON: When we go back to  11 Exhibit 3, I'll check. Asher will flip  12 through it.  13 Asher, I don't know if --  14 MR. TRANGLE: It's all one PDF, the  15 production from you.  16 MS. DAVIDSON: We're going to go right  17 back to it, Leigh. I thought that  18 Dr. Clarke-Pearson would know what article  19 he had sent. Since he didn't know, we need  20 to pull up the article, and then we'll go  21 back.  22 MS. O'DELL: That's more than fine. We  23 just saw one page. And if it was a multiple  24 page exhibit, I just wanted to understand  25 that.</p>	<p style="text-align: right;">Page 45</p> <p>1 Q. Why would you have sent ACOG an article  2 about J&amp;J putting talc liabilities into bankruptcy?  3 A. Because I wanted to make sure ACOG was  4 aware that J&amp;J was putting it into bankruptcy, that  5 J&amp;J's baby powder had been found to have asbestos  6 in it, and that ACOG should think about why J&amp;J is  7 going into bankruptcy at this point in time.  8 Q. Would you consider this to be a  9 scientific article?  10 A. No, it's a news report.  11 Q. Was it your idea to send this specific  12 article --  13 A. Yes.  14 Q. -- or is it the lawyers?  15 A. My idea.  16 Q. Did anyone tell you to send this  17 article to ACOG?  18 A. No. I'd been trying to communicate  19 with ACOG and SGO, as you know, previously on other  20 topics related to talc and ovarian cancer. This is  21 just one more attempt at communicating with them,  22 trying to get their attention.  23 Q. Did you consider sending ACOG a  24 scientific article about talc and ovarian cancer as  25 opposed to a news article about J&amp;J's bankruptcy?</p>



<p style="text-align: right;">Page 46</p> <p>1 MS. O'DELL: Objection to form.</p> <p>2 THE WITNESS: I believe in the past I</p> <p>3 have sent them scientific articles.</p> <p>4 BY MS. DAVIDSON:</p> <p>5 Q. What scientific articles had you sent</p> <p>6 them in the past?</p> <p>7 A. I would have to go back to my e-mails</p> <p>8 to answer your question.</p> <p>9 As you might be aware, I -- if it's all</p> <p>10 part of the same exhibit, my communication on</p> <p>11 February 14 to ACOG and SGO has a link to</p> <p>12 demonstrate 31 to 65 percent increased risk of</p> <p>13 ovarian cancer in women with baby powder used twice</p> <p>14 a week. That link is a scientific article.</p> <p>15 Q. Who wrote that article?</p> <p>16 A. I would have to pull that up to see the</p> <p>17 link.</p> <p>18 Q. Do you know if that article was written</p> <p>19 by a paid plaintiffs' expert?</p> <p>20 A. I don't know. You'll have to tell me</p> <p>21 who the article was written by.</p> <p>22 Q. Do you know if you told ACOG whether</p> <p>23 the article was written by a paid plaintiffs'</p> <p>24 expert?</p> <p>25 A. Most articles usually have a disclosure</p>	<p style="text-align: right;">Page 48</p> <p>1 that?</p> <p>2 MS. O'DELL: So just for a moment, just</p> <p>3 stop you for a moment there, Jessica. I</p> <p>4 think Asher indicated he was going to put</p> <p>5 the article in the chat. He's not done that</p> <p>6 yet.</p> <p>7 So, Asher, if you don't mind doing</p> <p>8 that, the Exhibit 4 in the chat. Let's see,</p> <p>9 I don't have it in mine. So I have only the</p> <p>10 chart that was previously marked regarding</p> <p>11 Dr. Clarke-Pearson's invoices. So if you</p> <p>12 wouldn't mind maybe putting it up again</p> <p>13 because that's all I'm seeing at the moment.</p> <p>14 MS. DAVIDSON: Asher --</p> <p>15 MS. O'DELL: It just appeared. And so</p> <p>16 if you've got a question about what was said</p> <p>17 in the article, then Dr. Clarke-Pearson can</p> <p>18 pull it up in the chat and look at the</p> <p>19 article and be able to review it.</p> <p>20 So, Dr. Pearson, if you need assistance</p> <p>21 opening the article in the chat, we're happy</p> <p>22 to do that.</p> <p>23 MS. DAVIDSON: Asher --</p> <p>24 MR. TRANGLE: Yeah.</p> <p>25 MS. DAVIDSON: Can you put it back on</p>
<p style="text-align: right;">Page 47</p> <p>1 on them, explains who -- any financial or conflict</p> <p>2 of interest.</p> <p>3 Q. My question is did you tell ACOG that</p> <p>4 the author of the paper was a plaintiffs' expert?</p> <p>5 MS. O'DELL: Object to the form.</p> <p>6 THE WITNESS: What I told ACOG is on</p> <p>7 the e-mail. I told them nothing more.</p> <p>8 BY MS. DAVIDSON:</p> <p>9 Q. In other words, you did not tell ACOG</p> <p>10 that the article was by a plaintiffs' lawyer;</p> <p>11 correct?</p> <p>12 MS. O'DELL: Object to the form.</p> <p>13 THE WITNESS: I didn't specifically say</p> <p>14 that in this -- in this e-mail, no.</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. Is it your testimony that this article</p> <p>17 from Reuters references an FDA finding of asbestos?</p> <p>18 MS. O'DELL: Are you talking about</p> <p>19 Exhibit 4?</p> <p>20 MS. DAVIDSON: I am. I believe you</p> <p>21 said a minute ago that you sent this to ACOG</p> <p>22 because you wanted them to know about the</p> <p>23 FDA finding of asbestos in one lot of</p> <p>24 Johnson's baby powder. So is it your</p> <p>25 recollection that this article references</p>	<p style="text-align: right;">Page 49</p> <p>1 the screen.</p> <p>2 And, Leigh, I'd really appreciate it if</p> <p>3 you didn't testify or coach the witness.</p> <p>4 MS. O'DELL: I am not.</p> <p>5 MR. TRANGLE: I'll put it back.</p> <p>6 MS. O'DELL: I am not. But if an</p> <p>7 article has been marked and there's been</p> <p>8 questions about what's in the substance of</p> <p>9 the article, he's entitled to review it, not</p> <p>10 just what's on the screen.</p> <p>11 So if you -- Dr. Clarke-Pearson, you</p> <p>12 can open the chat and -- at the bottom. And</p> <p>13 once you open the chat, then you'll be able</p> <p>14 to open that article and then review it if</p> <p>15 you need to and then you're welcome to</p> <p>16 respond to Ms. Davidson's questions.</p> <p>17 MS. DAVIDSON: Thank you for that</p> <p>18 colloquy, Leigh.</p> <p>19 THE WITNESS: All right. Okay.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. Dr. Clarke-Pearson, given Leigh's</p> <p>22 lecture, you may have forgotten the question. The</p> <p>23 question was you testified earlier that you sent</p> <p>24 this article to ACOG because you wanted ACOG to</p> <p>25 know that the FDA had found asbestos in talc. And</p>



<p style="text-align: right;">Page 50</p> <p>1 I'm wondering is it your testimony that this  2 article references that?  3 A. Actually, I think I answered your  4 question once I saw what the article was. So I was  5 mistaken. This article talks about talc, the J&amp;J  6 putting talc liabilities into bankruptcy.  7 Q. And it doesn't mention FDA's finding --  8 purported finding of talc in one lot of --  9 MS. O'DELL: Object.  10 THE WITNESS: I would -- I would have  11 to --  12 BY MS. DAVIDSON:  13 Q. I'm in the middle of my question,  14 Dr. Clarke-Pearson. I request that you don't  15 interrupt me and let me finish my question.  16 To your knowledge, having reviewed now  17 this article, which I believe is in front of you,  18 there is no reference to any FDA purported finding  19 of talc in any Johnson's Baby Powder; correct?  20 MS. O'DELL: Object to the form.  21 THE WITNESS: I haven't really reviewed  22 this. I asked that the link be opened up so  23 I could see what the article -- publication  24 was. Now that I've got the publication in  25 front of me, I can read it for you. So I</p>	<p style="text-align: right;">Page 52</p> <p>1 THE WITNESS: If you would like me to  2 reread this article from Reuters and be sure  3 of what I'm saying, then we can take the  4 time to read it. Otherwise, I think what I  5 was trying to do was to alert ACOG to this  6 article and let them read it and be aware of  7 what J&amp;J was doing.  8 BY MS. DAVIDSON:  9 Q. Do medical associations typically make  10 scientific decisions based on whether a company has  11 put its -- a subsidiary into bankruptcy?  12 A. I think medical organizations make  13 decisions based on lots of things that are not  14 specifically scientific, public opinion,  15 legislation, other information that organizations  16 are able to acquire. ACOG being concerned about  17 women's health. SGO being concerned about women  18 with ovarian cancer and preventing ovarian cancer.  19 I would use some of this information as part of  20 their decision-making.  21 Q. Is it your opinion that the fact that  22 lawsuits have been filed against a company  23 supports -- should support public health decisions?  24 MS. O'DELL: Object to the form.  25 THE WITNESS: Can I try to rephrase</p>
<p style="text-align: right;">Page 51</p> <p>1 was misspoken if, in fact, this doesn't say  2 that FDA found talc. I would have to reread  3 this article. It's been a while.  4 What I was referencing earlier in this  5 brief conversation was another link you were  6 asking if I had sent scientific articles to  7 ACOG, and I was referencing a e-mail that I  8 sent on February 14, 2022. This is a link  9 to a scientific publication.  10 BY MS. DAVIDSON:  11 Q. And that scientific publication was  12 co-authored by a plaintiffs' expert; correct?  13 A. You'll have to tell me which expert  14 you're talking about.  15 Q. Do you know whether that article was  16 co-authored by a plaintiffs' expert?  17 A. I need to pull that article up and look  18 at all the authors to be able to answer your  19 question.  20 Q. Okay. We're going to talk about that  21 article later. So just to be clear, are you -- are  22 you correcting your earlier testimony that you  23 shared this with ACOG in order to share information  24 about the FDA?  25 MS. O'DELL: Object to the form.</p>	<p style="text-align: right;">Page 53</p> <p>1 what you're asking me?  2 Are you saying that medical  3 organizations would make decisions based on  4 the fact that the lawsuit was filed?  5 BY MS. DAVIDSON:  6 Q. Or in this case based on the fact  7 according to this article that tens of thousands of  8 lawsuits were filed; correct?  9 MS. O'DELL: Object to the form.  10 THE WITNESS: If that's what it says in  11 this article, you know, tens of thousands.  12 So would a medical organization make a  13 decision based on that only? No, of course  14 not.  15 But it's just a piece of information  16 that they can use as they consider, go  17 through a full evaluation of the issue.  18 BY MS. DAVIDSON:  19 Q. Are you an expert on bankruptcy?  20 A. No, I'm not.  21 Q. Did anyone at ACOG respond to this  22 e-mail?  23 A. I believe we sent you an e-mail  24 response.  25 MS. DAVIDSON: Asher, do you want to go</p>

<p style="text-align: right;">Page 54</p> <p>1 back to Exhibit 3 and put up ACOG's</p> <p>2 response.</p> <p>3 MR. TRANGLE: I don't think I saw a</p> <p>4 response for this one.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Dr. Clarke-Pearson, did ACOG send a</p> <p>7 response that you did not provide to us in</p> <p>8 discovery?</p> <p>9 A. I'm looking at the e-mails that I have</p> <p>10 in front of me, which you have the same e-mails. I</p> <p>11 don't -- I don't recall. I could not find a e-mail</p> <p>12 response from ACOG on that topic -- on this</p> <p>13 particular e-mail.</p> <p>14 Q. There's a redacted e-mail at the top of</p> <p>15 this e-mail. Is that simply you forwarding this</p> <p>16 e-mail to counsel?</p> <p>17 MS. O'DELL: I would represent that</p> <p>18 that is the case, that's a communication</p> <p>19 with counsel, and that's the reason it was</p> <p>20 redacted.</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. So sitting here today, do you know</p> <p>23 whether ACOG responded to this e-mail or not?</p> <p>24 A. I don't have any evidence that ACOG</p> <p>25 responded.</p>	<p style="text-align: right;">Page 56</p> <p>1 THE WITNESS: The Reuters article is</p> <p>2 not a scientific article. I think I said</p> <p>3 that.</p> <p>4 BY MS. DAVIDSON:</p> <p>5 Q. Is it your opinion that the Reuters</p> <p>6 article is more relevant to ACOG's analysis of the</p> <p>7 talc issue than the published O'Brien papers?</p> <p>8 MS. DAVIDSON: Object to the form.</p> <p>9 THE WITNESS: They are two different</p> <p>10 issues.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. What do you mean by that?</p> <p>13 MS. O'DELL: I'm sorry, I didn't hear</p> <p>14 that. Please restate the question.</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. I just asked him to explain what he</p> <p>17 means by that.</p> <p>18 MS. O'DELL: You're coming in very</p> <p>19 faintly.</p> <p>20 THE WITNESS: Very faint.</p> <p>21 MS. O'DELL: Jessica, I think it may be</p> <p>22 either -- if you don't mind getting closer</p> <p>23 to your microphone.</p> <p>24 MS. DAVIDSON: I am so close. I'm like</p> <p>25 3 inches away from my microphone.</p>
<p style="text-align: right;">Page 55</p> <p>1 Q. Are you familiar with two papers that</p> <p>2 were published by a woman named O'Brien?</p> <p>3 A. Yes. You want to be specific about</p> <p>4 which two papers?</p> <p>5 Q. Are you aware of two papers published</p> <p>6 by a woman named O'Brien with respect to ovarian</p> <p>7 cancer?</p> <p>8 MS. O'DELL: Object to the form.</p> <p>9 THE WITNESS: These two papers that</p> <p>10 she's been a co-author on.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. Have you sent any of the O'Brien papers</p> <p>13 to either ACOG or SGO?</p> <p>14 A. Not that I'm aware of.</p> <p>15 Q. Why not?</p> <p>16 A. Because if I started sending every</p> <p>17 paper that came out, I would be sending papers all</p> <p>18 the time. So I have not sent those two or any</p> <p>19 others that have come out.</p> <p>20 Q. Is it your opinion that the Yahoo</p> <p>21 Finance article about J&amp;J's bankruptcy has more</p> <p>22 scientific value than the O'Brien publications</p> <p>23 about talc and ovarian cancer?</p> <p>24 MS. O'DELL: Object to the form.</p> <p>25 Misstates his testimony.</p>	<p style="text-align: right;">Page 57</p> <p>1 MS. O'DELL: Yeah. Thank you for that,</p> <p>2 but --</p> <p>3 MS. DAVIDSON: Can't get closer.</p> <p>4 MS. O'DELL: We can hear Christine</p> <p>5 fine. So I think it's something on your</p> <p>6 setup because Christine comes in loud and</p> <p>7 clear when she's spoken. So if you don't</p> <p>8 remind repeating that, that would be</p> <p>9 helpful.</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. I just asked Dr. Clarke-Pearson what he</p> <p>12 meant by what he said.</p> <p>13 A. Now I've lost track of what we were</p> <p>14 talking about. We were talking about Reuters</p> <p>15 article.</p> <p>16 Q. I was asking you whether you believe</p> <p>17 that the Reuters article is more relevant to ACOG's</p> <p>18 assessment of the talc and ovarian cancer issue</p> <p>19 than the O'Brien publications?</p> <p>20 MS. O'DELL: Object to the form.</p> <p>21 THE WITNESS: So my answer is it's a</p> <p>22 piece of information that I would say it's</p> <p>23 more relevant than the whole picture of</p> <p>24 talcum powder causing ovarian cancer. It</p> <p>25 was a point in time that I felt was</p>

<p style="text-align: right;">Page 58</p> <p>1 important to point out to ACOG.</p> <p>2 BY MS. DAVIDSON:</p> <p>3 Q. And you did not feel it was important</p> <p>4 to share the O'Brien papers with ACOG; is that</p> <p>5 correct?</p> <p>6 MS. O'DELL: Object to the form.</p> <p>7 THE WITNESS: There's a lot of papers</p> <p>8 that I could have shared with ACOG above and</p> <p>9 beyond the O'Brien paper. I chose not to</p> <p>10 continue to deluge them with publications</p> <p>11 coming out showing talcum powder causing</p> <p>12 ovarian cancer.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. Is that what the O'Brien papers show?</p> <p>15 A. I'd have to look at the O'Brien paper</p> <p>16 to answer your question.</p> <p>17 Q. And when you sent this on October 15,</p> <p>18 2021, was that before or after O'Brien published</p> <p>19 any of her papers with respect to talc and ovarian</p> <p>20 cancer?</p> <p>21 A. Again, I don't know without seeing the</p> <p>22 papers and dates of publication.</p> <p>23 Q. All right. Let's move to the</p> <p>24 Valentine's Day e-mail to ACOG, February 14, 2022.</p> <p>25 Were any of the O'Brien papers about talc and</p>	<p style="text-align: right;">Page 60</p> <p>1 this link, which is the Woolen article, with ACOG</p> <p>2 and not the O'Brien papers?</p> <p>3 MS. O'DELL: Object to the form.</p> <p>4 THE WITNESS: I think this paper -- I</p> <p>5 mean, it's a powerful paper. It says that</p> <p>6 frequent use greater than two times a week</p> <p>7 based on their analysis increases the risk</p> <p>8 of ovarian cancer significantly.</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. Are you aware that the link to this,</p> <p>11 which is the Woolen paper, let's mark that as</p> <p>12 Exhibit 5, Asher.</p> <p>13 MS. O'DELL: If you want to get the</p> <p>14 Woolen paper, you can read that. We have</p> <p>15 it.</p> <p>16 (Exhibit 5 marked for identification.)</p> <p>17 BY MS. DAVIDSON:</p> <p>18 Q. Are you aware that the Woolen</p> <p>19 meta-analysis that you sent to ACOG was based on a</p> <p>20 meta-analysis that was prepared for this</p> <p>21 litigation?</p> <p>22 MS. O'DELL: I object to the form.</p> <p>23 THE WITNESS: I was not aware it has</p> <p>24 anything to do with the litigation.</p> <p>25 BY MS. DAVIDSON:</p>
<p style="text-align: right;">Page 59</p> <p>1 ovarian cancer published before February 14, 2022?</p> <p>2 MS. O'DELL: Object to the form, vague.</p> <p>3 Dr. O'Brien has published a number of</p> <p>4 papers. And so the questions aren't clear.</p> <p>5 MS. DAVIDSON: Leigh --</p> <p>6 MS. O'DELL: Let me just finish. I</p> <p>7 would say further Dr. Clarke-Pearson was</p> <p>8 examined about the O'Brien paper extensively</p> <p>9 in his August 2021 deposition. And as you</p> <p>10 know, Jessica, this is a deposition to</p> <p>11 update his testimony on any new materials</p> <p>12 since August 2021.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. Dr. Clarke-Pearson, when you sent these</p> <p>15 papers -- this paper, this link to ACOG in</p> <p>16 February 14, 2022, was that before or after O'Brien</p> <p>17 had published papers relating to talc and ovarian</p> <p>18 cancer?</p> <p>19 A. I don't know the exact dates that</p> <p>20 O'Brien published in this specific paper you're</p> <p>21 referring to which she has co-authored and authored</p> <p>22 a number of papers. So some of those papers were</p> <p>23 before this Valentine's Day 2022 e-mail that I</p> <p>24 submitted.</p> <p>25 Q. Why did you decide to share this --</p>	<p style="text-align: right;">Page 61</p> <p>1 Q. Are you familiar with any of the names</p> <p>2 of the authors of this paper?</p> <p>3 A. Well, Smith-Bindman, I know has been an</p> <p>4 expert for the plaintiff. I do not know her. The</p> <p>5 other two authors, I don't know at all.</p> <p>6 Q. Is there a convention in published</p> <p>7 papers have the most senior person's name last?</p> <p>8 A. I'm sorry. Senior person's name last?</p> <p>9 Q. Uh-huh.</p> <p>10 A. It's a convention that is usually used,</p> <p>11 but I think that's an agreement amongst all the</p> <p>12 authors. There's only three authors in this paper.</p> <p>13 Q. Let's mark O'Brien 2020 as Exhibit 6.</p> <p>14 (Exhibit 6 marked for identification.)</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. This is a pooled analysis, correct,</p> <p>17 Dr. Clarke-Pearson?</p> <p>18 A. Let me take a moment to pull it up.</p> <p>19 Q. It's on the screen. And if you look</p> <p>20 at --</p> <p>21 A. Well, first of all, it's so small I</p> <p>22 can't read it and.</p> <p>23 Q. There you go.</p> <p>24 MS. O'DELL: Plus he's happy to respond</p> <p>25 to appropriate questions. But he was</p>

<p style="text-align: right;">Page 62</p> <p>1 examined at length on the O'Brien paper in</p> <p>2 his 2021 deposition. And this deposition is</p> <p>3 for purposes of you inquiring about</p> <p>4 materials disclosed that are new since</p> <p>5 August of 2021. And so I object to any</p> <p>6 examination that goes into the details of</p> <p>7 O'Brien.</p> <p>8 BY MS. DAVIDSON:</p> <p>9 Q. Dr. Clarke-Pearson, this was a pooled</p> <p>10 analysis; correct?</p> <p>11 If you look under design, it says,</p> <p>12 "data were pooled."</p> <p>13 MS. O'DELL: Feel free to review the</p> <p>14 paper until you're prepared to answer</p> <p>15 questions, Dr. Clarke-Pearson.</p> <p>16 THE WITNESS: I'm having a hard time</p> <p>17 finding it specifically.</p> <p>18 BY MS. DAVIDSON:</p> <p>19 Q. Can you please look at it on the screen</p> <p>20 so that we can move on because I have limited time</p> <p>21 here today?</p> <p>22 MS. O'DELL: Would you mind repeating</p> <p>23 your question please or ask Christine if you</p> <p>24 would read it back.</p> <p>25 BY MS. DAVIDSON:</p>	<p style="text-align: right;">Page 64</p> <p>1 position is aside from being a M.D., Ph.D.</p> <p>2 Q. And you didn't send this to ACOG;</p> <p>3 correct?</p> <p>4 A. I'm sorry, would you repeat that? I</p> <p>5 didn't hear you.</p> <p>6 Q. You did not send this article to ACOG;</p> <p>7 correct?</p> <p>8 A. No. That's correct.</p> <p>9 Q. Can we mark as Exhibit 7 Wentzensen,</p> <p>10 O'Brien 2021.</p> <p>11 (Exhibit 7 marked for identification.)</p> <p>12 MS. DAVIDSON: Please put it up on the</p> <p>13 screen, Asher, and send it in the chat.</p> <p>14 MS. O'DELL: The same objection to the</p> <p>15 Wentzensen, O'Brien article. That article</p> <p>16 was referenced and included on the materials</p> <p>17 list in Dr. Clarke-Pearson's July 2021</p> <p>18 report. He was examined on it during his</p> <p>19 August 2021 deposition at pages 15, pages</p> <p>20 21, 86, 278 through 286. That was on --</p> <p>21 MS. DAVIDSON: Hey, Leigh?</p> <p>22 MS. O'DELL: -- that was on his</p> <p>23 August 26th deposition and --</p> <p>24 MS. DAVIDSON: Instead of trying to</p> <p>25 derail this deposition, why don't you wait</p>
<p style="text-align: right;">Page 63</p> <p>1 Q. Dr. Clarke-Pearson, this is a pooled</p> <p>2 analysis of cohort studies; correct?</p> <p>3 A. I see that in the abstract, yes.</p> <p>4 Q. Thank you.</p> <p>5 A. Sorry.</p> <p>6 Q. If you look at the authors, are you</p> <p>7 familiar with any of these authors?</p> <p>8 A. Actually, Dr. Kaunitz, I believe if</p> <p>9 he's from Florida, I know him. We've done a little</p> <p>10 bit of work together on morcellation of uterine</p> <p>11 sarcoma and fibroids.</p> <p>12 O'Brien, I'm only familiar with because</p> <p>13 she has a number of publications. The other</p> <p>14 authors that I'm looking at on the screen, I'm not</p> <p>15 at all familiar with or don't know them.</p> <p>16 Q. Are any of them plaintiffs' experts to</p> <p>17 your knowledge in this litigation?</p> <p>18 A. Not that I know of.</p> <p>19 Q. Are any of them NIH scientists?</p> <p>20 A. I'm not sure what their affiliation is.</p> <p>21 Q. You're not familiar with</p> <p>22 Dr. Wentzensen?</p> <p>23 A. Sorry. Dr. who?</p> <p>24 Q. Wentzensen, the senior author.</p> <p>25 A. I'm not aware of what Dr. Wentzensen's</p>	<p style="text-align: right;">Page 65</p> <p>1 to hear my questions to determine whether</p> <p>2 they actually are repeating prior questions.</p> <p>3 MS. O'DELL: Let me finish.</p> <p>4 MS. DAVIDSON: Because you've now</p> <p>5 objected to every single question I've</p> <p>6 asked. It's very clear you're trying to</p> <p>7 drain the clock. It's extremely</p> <p>8 unprofessional behavior.</p> <p>9 So why don't you wait until my question</p> <p>10 and then decide if you want to object to it.</p> <p>11 Asher, are you putting it up on the</p> <p>12 screen?</p> <p>13 MR. TRANGLE: Yes.</p> <p>14 MS. O'DELL: Excuse me.</p> <p>15 MS. DAVIDSON: If you want to object,</p> <p>16 please object. Stop wasting hours and hours</p> <p>17 of this deposition.</p> <p>18 MS. O'DELL: I'm entitled to state</p> <p>19 the -- excuse me, let me finish. I'm</p> <p>20 entitled to state the basis -- excuse me.</p> <p>21 Please let me finish. And I've done that in</p> <p>22 a very professional and courteous way, but</p> <p>23 the purposes of these depositions are quite</p> <p>24 clear. And it's very clear that you want to</p> <p>25 retread ground that was previously covered.</p>

<p style="text-align: right;">Page 66</p> <p>1 And I'm entitled to note my objection for</p> <p>2 the record which I've done so.</p> <p>3 So if you have a high-level question</p> <p>4 about O'Brien and Wentzensen, ask it, and</p> <p>5 let's move on. But we are going to object</p> <p>6 and get the judge on the phone for any</p> <p>7 detailed retreading of old material. That's</p> <p>8 what I'm trying to convey to you.</p> <p>9 MS. DAVIDSON: I am going to have to</p> <p>10 reserve the right to go beyond seven hours</p> <p>11 because, Leigh, you are clearly</p> <p>12 filibustering and trying to fill as much of</p> <p>13 this record as possible with your</p> <p>14 objections.</p> <p>15 Asher, can you please --</p> <p>16 Stop interrupting me.</p> <p>17 MS. O'DELL: The amount of the time for</p> <p>18 the deposition today is four hours, and just</p> <p>19 be clear on that. That's what the order</p> <p>20 says. And that's what we'll be available</p> <p>21 for today.</p> <p>22 BY MS. DAVIDSON:</p> <p>23 Q. Dr. Clarke-Pearson, can you read to me</p> <p>24 Dr. Wentzensen and Dr. O'Brien's titles here?</p> <p>25 A. Titles on the -- so Wentzensen is from</p>	<p style="text-align: right;">Page 68</p> <p>1 MR. TRANGLE: 10/10/23.</p> <p>2 MS. DAVIDSON: The Court's order of</p> <p>3 10/10/2023 explicitly states that general</p> <p>4 causation expert supplemental depositions</p> <p>5 will be four hours. If the general</p> <p>6 causation expert also has specific opinions,</p> <p>7 it will be 7 hours or 14 hours. The order</p> <p>8 could not be clearer. This order was issued</p> <p>9 in October 2023, so it clearly contemplated</p> <p>10 supplemental reports.</p> <p>11 Dr. Clarke-Pearson has amended his case</p> <p>12 specific opinions. He has also added case</p> <p>13 specific materials to his materials</p> <p>14 considered. If you end the deposition after</p> <p>15 four hours, you are in violation of the</p> <p>16 order.</p> <p>17 MS. O'DELL: We disagree.</p> <p>18 MS. DAVIDSON: Also, additional</p> <p>19 opinions with respect to Godleski that</p> <p>20 wasn't in the original report. There are</p> <p>21 material updates related to</p> <p>22 Dr. Clarke-Pearson's case specific opinions.</p> <p>23 If this deposition ends after hour hours as</p> <p>24 opposed to 14, you are in violation of the</p> <p>25 Court's order. Let's continue with the</p>
<p style="text-align: right;">Page 67</p> <p>1 the Division of Cancer Epidemiology and Genetics,</p> <p>2 National Cancer Institute, National Institutes of</p> <p>3 Health.</p> <p>4 And O'Brien is epidemiology branch,</p> <p>5 National Institute of Environmental Health</p> <p>6 Sciences, Research Triangle Park.</p> <p>7 Q. Is either of them an expert in this</p> <p>8 litigation?</p> <p>9 A. Not that I'm aware of.</p> <p>10 Q. Did you send this document to ACOG or</p> <p>11 SGO?</p> <p>12 A. No.</p> <p>13 MS. DAVIDSON: Let's go off the record.</p> <p>14 (Recess taken from 10:20 a.m. until 10:35 a.m.)</p> <p>15 MS. O'DELL: So counsel for Johnson &amp;</p> <p>16 Johnson seeks to extend this deposition</p> <p>17 beyond four hours. The plaintiffs' position</p> <p>18 is that this is a supplemental deposition</p> <p>19 only on materials that are new in</p> <p>20 Dr. Clarke-Pearson's report since August of</p> <p>21 2021. And we submit that the deposition</p> <p>22 should be limited to four hours, and we will</p> <p>23 stop the deposition at that time.</p> <p>24 MS. DAVIDSON: The Court's -- Asher,</p> <p>25 what's the date of the Court's order?</p>	<p style="text-align: right;">Page 69</p> <p>1 deposition.</p> <p>2 MS. O'DELL: We disagree with that</p> <p>3 position. There are no new opinions about</p> <p>4 Dr. Godleski and others, but let's proceed.</p> <p>5 And that took two minutes.</p> <p>6 BY MS. DAVIDSON:</p> <p>7 Q. Dr. Clarke-Pearson, I'd like to mark</p> <p>8 your second amended report from 11/15/2023 as</p> <p>9 Exhibit 8.</p> <p>10 (Exhibit 8 marked for identification.)</p> <p>11 MS. DAVIDSON: If we could turn to</p> <p>12 page 6, Asher.</p> <p>13 MR. TRANGLE: Page 6?</p> <p>14 MS. DAVIDSON: Uh-huh.</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. Dr. Clarke-Pearson, is it --</p> <p>17 MS. DAVIDSON: Asher, that's not on the</p> <p>18 screen. That's all the way to the right.</p> <p>19 MR. TRANGLE: Can you guys see it?</p> <p>20 MS. DAVIDSON: No.</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. Is it your opinion, Dr. Clarke-Pearson,</p> <p>23 that Harper and Saed have demonstrated that</p> <p>24 exposure to Johnson's Baby Powder causes p53</p> <p>25 mutations, cell proliferation and malignant</p>



<p style="text-align: right;">Page 70</p> <p>1 transformation in normal ovarian epithelial cells?</p> <p>2 A. Yes. That's what they say in their</p> <p>3 paper.</p> <p>4 Q. I'm not asking you what they say in</p> <p>5 your paper. You say in your report that they have</p> <p>6 demonstrated this. Is it your opinion that they</p> <p>7 demonstrated these things?</p> <p>8 A. That is my opinion, yes.</p> <p>9 Q. Who is Dr. Saed?</p> <p>10 A. He's a translational research</p> <p>11 scientist, as best I understand, at Wayne State</p> <p>12 University in the cancer center there.</p> <p>13 Q. Is a plaintiffs' expert in this</p> <p>14 litigation?</p> <p>15 A. I believe so.</p> <p>16 Q. Had you ever heard of him prior to this</p> <p>17 litigation?</p> <p>18 A. He's written a review article and -- in</p> <p>19 the Gynecologic Oncology Journal I read pretty</p> <p>20 consistently. I'm not sure when he wrote that</p> <p>21 article. So I'm aware of him from research he's</p> <p>22 done outside of this litigation.</p> <p>23 Q. Have you ever cited Dr. Saed in any of</p> <p>24 your non-litigation work?</p> <p>25 MS. O'DELL: Object to the form.</p>	<p style="text-align: right;">Page 72</p> <p>1 the lead author?</p> <p>2 Q. Correct. The one that we just talked</p> <p>3 about where you --</p> <p>4 A. The technique that they used to --</p> <p>5 thank you, Margaret.</p> <p>6 The technique that they used to assess</p> <p>7 proliferation and identify malignant transformation</p> <p>8 is a commercial technique. And I'm aware that</p> <p>9 technique was considered to be used in assessing</p> <p>10 other chemicals and products as to their</p> <p>11 carcinogenicity, the chance it can cause cancer.</p> <p>12 And so it's a technique that's used in</p> <p>13 laboratories.</p> <p>14 Q. What technique is that that you're</p> <p>15 referring to?</p> <p>16 A. Well, let me turn to their paper to</p> <p>17 give you the name of it. I'm sorry, I'm skimming</p> <p>18 the materials section here to try to identify.</p> <p>19 Q. I believe you testified that the</p> <p>20 technique they used was one you're familiar with.</p> <p>21 What technique is that?</p> <p>22 A. No, I didn't say I was familiar with</p> <p>23 it. I said I had read about it enough to</p> <p>24 understand that it's used more than just in his</p> <p>25 laboratory to identify products, things that could</p>
<p style="text-align: right;">Page 71</p> <p>1 THE WITNESS: I'm sorry, cited him in</p> <p>2 what situation?</p> <p>3 BY MS. DAVIDSON:</p> <p>4 Q. Any non-litigation work.</p> <p>5 A. No. I don't think I've written</p> <p>6 anything that would require a citation about him or</p> <p>7 by him.</p> <p>8 Q. Had you heard of his lab before you</p> <p>9 were involved in this litigation?</p> <p>10 A. I'm not sure what you mean by heard of</p> <p>11 his lab. I was aware that he had written a review</p> <p>12 article and he is a scientist. I would assume that</p> <p>13 he has a lab.</p> <p>14 Q. Have you taken any steps to assess the</p> <p>15 reliability of his conclusions or findings in the</p> <p>16 paper that we've marked as Exhibit 8?</p> <p>17 MS. O'DELL: She's -- just object to</p> <p>18 the form. And Dr. Clarke-Pearson's report I</p> <p>19 believe is Exhibit 8. I'm not sure you've</p> <p>20 marked the paper.</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. Have you taken any steps to assess the</p> <p>23 reliability of Dr. Saed's conclusions or findings</p> <p>24 in Harper 2023?</p> <p>25 A. You're referencing the Harper paper as</p>	<p style="text-align: right;">Page 73</p> <p>1 cause cancer.</p> <p>2 Q. Where else have you read about the</p> <p>3 technique used by Dr. Saed?</p> <p>4 MS. O'DELL: He's trying to review the</p> <p>5 paper and answer your question, Jessica, if</p> <p>6 you'll just give him a moment.</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. Dr. Clarke-Pearson, if you need to</p> <p>9 review the article, I'd like to go off the record.</p> <p>10 This was listed in your materials reviewed. If you</p> <p>11 want to read the article, I'd like to go off the</p> <p>12 record. Are you planning to read the article</p> <p>13 before answering?</p> <p>14 A. I'm just trying to specifically find</p> <p>15 this technique that they describe in their</p> <p>16 materials. So I've seen the -- I'm sorry, I don't</p> <p>17 have the name. But the technique is described in</p> <p>18 the company that manufactures its website.</p> <p>19 Q. Dr. Clarke-Pearson, what are you doing</p> <p>20 now?</p> <p>21 A. I'm looking for the rest of this paper</p> <p>22 so I can see if I can help us understand what the</p> <p>23 name of the methodology is that he's using.</p> <p>24 Q. All right. Well, I don't have all day</p> <p>25 here.</p>



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1 A. I understand.  
2 Q. Although, I am entitled to 14 hours,  
3 your counsel intends to cut this deposition off  
4 prematurely. So if you don't know what technique  
5 he used, let's move on.  
6 A. Okay.  
7 Q. Do you know where else you've read  
8 about this technique?  
9 A. I've looked it up on the website of the  
10 company that makes -- manufactures this technique.  
11 Q. Have you ever heard of Minerva before?  
12 A. Anova?  
13 Q. Minerva.  
14 A. Minerva. The publication?  
15 Q. Uh-huh.  
16 A. It's a scientific peer-reviewed  
17 publication. I'm not sure I've heard of it per se.  
18 It's not something I would usually read.  
19 Q. When was the last time you read an  
20 article published in this journal?  
21 A. Probably I've never read an article  
22 published in this journal.  
23 Q. Have you ever submitted an article to  
24 this journal?  
25 A. No.

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1 Q. Are you aware of any groundbreaking  
2 scientific developments ever being published in  
3 this journal?  
4 MS. O'DELL: Object to the form.  
5 THE WITNESS: I don't have an opinion  
6 on that.  
7 BY MS. DAVIDSON:  
8 Q. Do you know of any groundbreaking  
9 scientific developments that were ever published in  
10 Minerva?  
11 MS. O'DELL: Object to the form. Asked  
12 and answered.  
13 THE WITNESS: Again, I don't have an  
14 opinion.  
15 BY MS. DAVIDSON:  
16 Q. I don't know what that means. Is that  
17 a yes or no?  
18 A. It means I don't know.  
19 Q. Have you ever cited a piece from  
20 Minerva in your professional work?  
21 MS. DAVIDSON: Objection. Asked and  
22 answered.  
23 THE WITNESS: Not that I'm aware of.  
24 BY MS. DAVIDSON:  
25 Q. What's your basis for saying that

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1 Harper and Saed demonstrated that Johnson's Baby  
2 Powder causes p53 mutations?  
3 A. Based on what they say in their paper.  
4 Q. Did you independently evaluate whether  
5 that is an accurate statement?  
6 A. I did not do any independent  
7 investigation on that topic, no.  
8 Q. Did you do any independent  
9 investigation on the validity of Harper and Saed's  
10 claim that they have shown that exposure to  
11 Johnson's Baby Powder causes p53 mutations, cell  
12 proliferation, or malignant transformation?  
13 MS. O'DELL: Object to form.  
14 THE WITNESS: I didn't do any separate  
15 investigation, though I read the paper.  
16 BY MS. DAVIDSON:  
17 Q. Did you discuss the paper with anyone  
18 in the field before making the statement?  
19 A. No.  
20 MS. O'DELL: Object to the form.  
21 THE WITNESS: No, I didn't.  
22 BY MS. DAVIDSON:  
23 Q. I take it from your statements earlier  
24 today about the materials you reviewed in  
25 preparation for your deposition that you're aware

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1 that this paper was rejected by numerous journals;  
2 is that correct?  
3 MS. O'DELL: I'm sorry. You cut out  
4 there for a minute. They were rejected by  
5 whom?  
6 BY MS. DAVIDSON:  
7 Q. By several publications; is that  
8 correct?  
9 MS. O'DELL: Object to the form.  
10 THE WITNESS: I've seen a reviewers or  
11 maybe more than reviewers list of comments  
12 about a paper. I'm not sure it's  
13 specifically this paper.  
14 BY MS. DAVIDSON:  
15 Q. Do you know which publications rejected  
16 this paper?  
17 A. Let me go to the -- what I was given.  
18 Looks like the start of this says Plus One.  
19 Several reviewers and comments. Minor comments.  
20 What I have looks like it's all reviewed from Plus  
21 One.  
22 Q. Do you know whether Reproductive  
23 Sciences rejected this paper?  
24 A. Not aware of that.  
25 Q. Do you know whether this paper was

<p style="text-align: right;">Page 78</p> <p>1 submitted to Gynecologic Oncology?</p> <p>2 A. I do not know.</p> <p>3 Q. Do you know whether Gynecologic</p> <p>4 Oncology rejected this paper?</p> <p>5 A. I don't know.</p> <p>6 Q. What is Gynecologic Oncology?</p> <p>7 A. It's a peer-reviewed publication that</p> <p>8 deals with gynecologic oncology topics both</p> <p>9 clinical and translational research.</p> <p>10 Q. Have you --</p> <p>11 A. It's --</p> <p>12 MS. O'DELL: I don't believe he was</p> <p>13 finished.</p> <p>14 THE WITNESS: It's a publication of the</p> <p>15 Society of Gynecologic Oncologists.</p> <p>16 BY MS. DAVIDSON:</p> <p>17 Q. Have you published papers there before?</p> <p>18 A. Yes.</p> <p>19 Q. Have you been on the editorial board?</p> <p>20 A. Yes.</p> <p>21 Q. Have you been a peer reviewer?</p> <p>22 A. Yes.</p> <p>23 Q. Have you been a peer reviewer for</p> <p>24 multiple journals?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 80</p> <p>1 peer reviewers and select peer reviewers that are</p> <p>2 most appropriate to review that particular paper.</p> <p>3 So a paper I might submit on clinical issues would</p> <p>4 not be reviewed by a basic scientist.</p> <p>5 Likewise, a clinician like myself would</p> <p>6 not necessarily be asked to review a translational</p> <p>7 research paper. So the editor tries to match the</p> <p>8 reviewer with the content and -- of that paper.</p> <p>9 Q. So for a paper like Dr. Saed's, what</p> <p>10 sort of peer reviewers would Gynecologic Oncology</p> <p>11 look for?</p> <p>12 A. I would think they would pick peer</p> <p>13 reviewers that are doing research -- laboratory</p> <p>14 research.</p> <p>15 Q. Okay. Dr. Clarke-Pearson, do you know</p> <p>16 whether it's biologically possible to show</p> <p>17 malignant cell transformation in 72 hours?</p> <p>18 A. That is what this paper says and that</p> <p>19 is what the manufacturer of the technique that they</p> <p>20 used says.</p> <p>21 Q. If Dr. Saed found malignant cell</p> <p>22 transformation after 72 hours of exposure to talc,</p> <p>23 would that be a revolutionary finding?</p> <p>24 MS. O'DELL: Object to the form.</p> <p>25 THE WITNESS: Not that I'm aware of.</p>
<p style="text-align: right;">Page 79</p> <p>1 Q. What does a peer reviewer do?</p> <p>2 A. A peer reviewer is asked to review the</p> <p>3 manuscript that's been submitted, evaluate it for</p> <p>4 its content, for lack of a better word, offer any</p> <p>5 criticism, any suggestions for improvement, and</p> <p>6 ultimately submit those comments which then usually</p> <p>7 go back to both the editor of the journal and --</p> <p>8 and the author of the manuscript.</p> <p>9 Q. At Gynecologic Oncology, have you ever</p> <p>10 been responsible for selecting peer reviewers?</p> <p>11 A. No, I have not.</p> <p>12 Q. Do you know how Gynecologic Oncology</p> <p>13 selects peer reviewers?</p> <p>14 A. Well, having been on the editorial</p> <p>15 board, I have some general idea that the peer</p> <p>16 reviewers -- there's a lengthy list of possible</p> <p>17 peer reviewers that have -- people that have agreed</p> <p>18 to participate as a peer reviewer. And then the</p> <p>19 editor, and I've never been an editor of GYN</p> <p>20 Oncology to pick out peer reviewers. I think I</p> <p>21 just answered that question to you -- for you. But</p> <p>22 the editor then goes through the panel of possible</p> <p>23 reviewers and picks out a few, usually two or</p> <p>24 three, to review the paper and submit and sends</p> <p>25 that to the reviewer. The editor would look at the</p>	<p style="text-align: right;">Page 81</p> <p>1 BY MS. DAVIDSON:</p> <p>2 Q. What do you mean by that?</p> <p>3 A. What do you mean by a revolutionary</p> <p>4 finding?</p> <p>5 Q. Would that be a huge scientific</p> <p>6 development for a scientist to find that exposure</p> <p>7 to talc can cause malignant cell transformation</p> <p>8 after 72 hours?</p> <p>9 MS. O'DELL: Object to the form.</p> <p>10 THE WITNESS: Based on what I</p> <p>11 understand about this technique, the</p> <p>12 technique is used to identify products that</p> <p>13 cause cancer. So if this transformation is</p> <p>14 considered malignant, then that's what this</p> <p>15 technique is showing.</p> <p>16 BY MS. DAVIDSON:</p> <p>17 Q. Can you identify any other situations</p> <p>18 where this technique has shown malignant</p> <p>19 transformation?</p> <p>20 A. I have not done a literature review on</p> <p>21 the use of this technique.</p> <p>22 Q. You previously testified that it would</p> <p>23 require 50 years of chronic inflammation or some</p> <p>24 period of decades to -- for ovarian cancer to --</p> <p>25 for talc exposure to cause ovarian cancer. Do you</p>

<p style="text-align: right;">Page 82</p> <p>1 recall testifying to that effect?</p> <p>2 MS. O'DELL: Object to the form.</p> <p>3 Jessica, is there specific testimony that</p> <p>4 you're referring to?</p> <p>5 Dr. Clarke-Pearson has testified over</p> <p>6 three days and a Daubert hearing. So I'm</p> <p>7 just asking what testimony you're referring</p> <p>8 to and if you can give us a page and line,</p> <p>9 we'd be happy to --</p> <p>10 MS. DAVIDSON: Leigh --</p> <p>11 MS. O'DELL: -- put that in front of</p> <p>12 him.</p> <p>13 MS. DAVIDSON: Leigh, I'm taking the</p> <p>14 deposition.</p> <p>15 MS. O'DELL: I understand that.</p> <p>16 MS. DAVIDSON: And your obstruction is</p> <p>17 really getting out of control.</p> <p>18 BY MS. DAVIDSON:</p> <p>19 Q. Dr. Clarke-Pearson, do you recall</p> <p>20 offering that testimony?</p> <p>21 MS. O'DELL: Let me just state my</p> <p>22 objection very briefly. That's not a</p> <p>23 quotation of Dr. Clarke-Pearson. If you</p> <p>24 would like to put in front of him specific</p> <p>25 testimony, I think that would be appropriate</p>	<p style="text-align: right;">Page 84</p> <p>1 transformation.</p> <p>2 BY MS. DAVIDSON:</p> <p>3 Q. But -- so are you just taking it on</p> <p>4 good faith and trust that Dr. Saed actually</p> <p>5 demonstrated malignant transformation?</p> <p>6 MS. O'DELL: Object to the form.</p> <p>7 THE WITNESS: I have investigated the</p> <p>8 technique they used is used in other</p> <p>9 situations to identify carcinogenicity of</p> <p>10 products like talcum powder.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. But sitting here today, you can't</p> <p>13 identify any other situations where this technique</p> <p>14 has shown carcinogenicity; correct?</p> <p>15 A. I would defer to the scientists that</p> <p>16 have done this kind of work.</p> <p>17 MS. O'DELL: Object.</p> <p>18 MS. DAVIDSON: Let's mark the</p> <p>19 peer-reviewed comments on Harper 2023 as</p> <p>20 Exhibit 9.</p> <p>21 (Exhibit 9 marked for identification.)</p> <p>22 MR. TRANGLE: Is there a page you want</p> <p>23 me to go to?</p> <p>24 MS. DAVIDSON: Let's go to the</p> <p>25 Gynecologic Oncology reviewers. If we could</p>
<p style="text-align: right;">Page 83</p> <p>1 before you ask that question.</p> <p>2 BY MS. DAVIDSON:</p> <p>3 Q. Dr. Clarke-Pearson, do you recall ever</p> <p>4 testifying that it would require chronic</p> <p>5 inflammation for a period of decades for exposure</p> <p>6 to talc to cause ovarian cancer?</p> <p>7 A. I think in general -- I'm not sure I</p> <p>8 testified -- but I believe that it does take time</p> <p>9 with chronic inflammation in the situation with</p> <p>10 talc to expose the ovary to talcum powder to result</p> <p>11 in transformation, the number of mutations that are</p> <p>12 required to result in clinical evidence of ovarian</p> <p>13 cancer.</p> <p>14 Q. Why would it take 50 years of chronic</p> <p>15 inflammation to get malignant transformation if</p> <p>16 Dr. Saed was able to demonstrate malignant</p> <p>17 transformation after 72 hours?</p> <p>18 MS. O'DELL: He said decades, not 50</p> <p>19 years. Misstates his testimony. Object to</p> <p>20 the form.</p> <p>21 You may answer, Doctor.</p> <p>22 THE WITNESS: I think I would defer to</p> <p>23 Dr. Saed and other scientists that are more</p> <p>24 familiar with this technique in terms of</p> <p>25 explaining how they achieve malignant</p>	<p style="text-align: right;">Page 85</p> <p>1 go to sentence that begins "As presented."</p> <p>2 MS. O'DELL: Give us a Bates Number for</p> <p>3 that particular page.</p> <p>4 MR. TRANGLE: This is page 69.</p> <p>5 MS. O'DELL: Okay. Thank you.</p> <p>6 MS. DAVIDSON: Can you center "as</p> <p>7 presented" on the screen, Asher?</p> <p>8 MR. TRANGLE: It's kind of hard.</p> <p>9 THE WITNESS: I don't think I have</p> <p>10 that.</p> <p>11 MS. O'DELL: So -- you may have a copy.</p> <p>12 BY MS. DAVIDSON:</p> <p>13 Q. Dr. Clarke-Pearson, could you read the</p> <p>14 first two sentences of the paragraph that begins</p> <p>15 "as presented" out loud?</p> <p>16 A. Certainly. What it says is, "As</p> <p>17 presented, the manuscript presents several major</p> <p>18 issues that warrant attention prior to publication.</p> <p>19 Of primary concern is reliance on a single</p> <p>20 commercial assay for assessment of transformation</p> <p>21 that has not been established in the literature."</p> <p>22 Q. Okay.</p> <p>23 A. Yeah.</p> <p>24 Q. I was just asking you to read two</p> <p>25 sentences.</p>

<p style="text-align: right;">Page 86</p> <p>1 Dr. Clarke-Pearson, this states that</p> <p>2 the technique used by Dr. Saed has not been</p> <p>3 established in the literature; correct?</p> <p>4 A. That's what it says, yes.</p> <p>5 Q. Do you disagree with that?</p> <p>6 A. I don't agree -- disagree with what it</p> <p>7 says, no.</p> <p>8 Q. Is it your testimony that the -- that</p> <p>9 this commercial assay for assessment of</p> <p>10 transformation has been established in the</p> <p>11 literature?</p> <p>12 MS. O'DELL: Objection. Form.</p> <p>13 THE WITNESS: I'm not aware of whether</p> <p>14 it has or hasn't been established. I</p> <p>15 haven't done that review.</p> <p>16 BY MS. DAVIDSON:</p> <p>17 Q. But you are offering the opinion that</p> <p>18 Dr. Saed has demonstrated malignant transformation;</p> <p>19 correct?</p> <p>20 A. Yes.</p> <p>21 Q. Does it give you pause that the</p> <p>22 commercial assay he used has not been established</p> <p>23 in the literature as a reliable means for</p> <p>24 assessment of transformation?</p> <p>25 MS. O'DELL: Object to the form.</p>	<p style="text-align: right;">Page 88</p> <p>1 wrote?</p> <p>2 MS. O'DELL: Object to the form.</p> <p>3 THE WITNESS: I have not done any work</p> <p>4 on that topic, no.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. The reviewer goes on to say that</p> <p>7 "appropriate statistical tests were not applied and</p> <p>8 thus the data are difficult to interpret."</p> <p>9 Do you see disagree with that</p> <p>10 statement?</p> <p>11 A. So let me back up from this. This is a</p> <p>12 review, I'm not sure when it was done. This paper</p> <p>13 was not published in GYN Oncology. So these are</p> <p>14 comments that were submitted to the authors. And,</p> <p>15 in general, it's been my experience as an author</p> <p>16 myself of 250 some odd peer-reviewed papers that</p> <p>17 the comments that I've received back from a</p> <p>18 reviewer after submitting a manuscript are those</p> <p>19 that I would evaluate and decide whether I want to</p> <p>20 add those edits to and corrections, if you will.</p> <p>21 In this case, though, what you're reading about</p> <p>22 statistics, Dr. Saed was basically -- it was</p> <p>23 suggested that he do something more with</p> <p>24 statistics.</p> <p>25 So this isn't a review of the paper</p>
<p style="text-align: right;">Page 87</p> <p>1 THE WITNESS: I am not aware of that.</p> <p>2 What I just read to you is a reviewer, who</p> <p>3 seems to be anonymous, offering the opinion</p> <p>4 about not being a review established in the</p> <p>5 literature that I read to you.</p> <p>6 BY MS. DAVIDSON:</p> <p>7 Q. In your experience, does Gynecologic</p> <p>8 Oncology have credentialed and capable peer</p> <p>9 reviewers?</p> <p>10 MS. O'DELL: Object to the form.</p> <p>11 THE WITNESS: I'm not sure what you</p> <p>12 mean by credentialed.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. What has been your experience about the</p> <p>15 caliber of reviewers for Gynecologic Oncology?</p> <p>16 MS. O'DELL: Object to the form. If</p> <p>17 you have any.</p> <p>18 THE WITNESS: I mean it depends upon</p> <p>19 what the reviewer is being asked to do and</p> <p>20 what their qualifications are. So I don't</p> <p>21 know who this reviewer is or what their</p> <p>22 qualifications are.</p> <p>23 BY MS. DAVIDSON:</p> <p>24 Q. Have you done any work that would</p> <p>25 enable you to disagree with what this reviewer</p>	<p style="text-align: right;">Page 89</p> <p>1 that is sitting in front of me that was published</p> <p>2 in Minerva. These are comments about a manuscript</p> <p>3 prior to publication that was probably edited. I</p> <p>4 would have to go through -- you and I would have to</p> <p>5 go through this manuscript and see whether he made</p> <p>6 those changes that are being suggested by this</p> <p>7 reviewer.</p> <p>8 But these comments are not necessarily</p> <p>9 comments that would apply to the current manuscript</p> <p>10 that was published in a peer-reviewed publication.</p> <p>11 Q. To your knowledge, did Dr. Saed make</p> <p>12 any changes to his statistical tests?</p> <p>13 A. I would have to look at this reviewer's</p> <p>14 comments and then go to Dr. Saed's -- actually</p> <p>15 Dr. Harper's paper and see whether those changes</p> <p>16 were made.</p> <p>17 Q. If Dr. Saed did not make changes to his</p> <p>18 statistical tests, would that concern you?</p> <p>19 MS. O'DELL: Objection.</p> <p>20 THE WITNESS: Yes. I would think that</p> <p>21 he would take to heart those suggestions.</p> <p>22 Now he may disagree with those suggestions</p> <p>23 and not make those changes. And he would</p> <p>24 have to offer up why he didn't make the</p> <p>25 changes. Maybe he is perfectly confident</p>

<p style="text-align: right;">Page 90</p> <p>1 and secure and certain that what he has done</p> <p>2 and that this reviewer could be wrong.</p> <p>3 BY MS. DAVIDSON:</p> <p>4 Q. The GYN Oncology reviewer also said the</p> <p>5 results of this study are overinterpreted.</p> <p>6 Do you have reason to disagree with the</p> <p>7 GYN Oncology reviewer that the results of this</p> <p>8 study are overinterpreted?</p> <p>9 MS. O'DELL: Directing us to where,</p> <p>10 please? I'm not seeing it on the screen. I</p> <p>11 may be overlooking it.</p> <p>12 MS. DAVIDSON: Asher, if you can put it</p> <p>13 up on the screen.</p> <p>14 BY MS. DAVIDSON:</p> <p>15 Q. Dr. Clarke-Pearson, can you respond to</p> <p>16 my statement: Do you disagree -- to my question.</p> <p>17 Do you disagree with the statement that</p> <p>18 the results of this study are overinterpreted?</p> <p>19 MS. O'DELL: Object to the form.</p> <p>20 THE WITNESS: I will take that you're</p> <p>21 reading this from somewhere that's on the</p> <p>22 screen. I don't see it. Is it</p> <p>23 overinterpreted? That's that reviewer's</p> <p>24 opinion.</p> <p>25 BY MS. DAVIDSON:</p>	<p style="text-align: right;">Page 92</p> <p>1 Q. Dr. Clarke-Pearson, did the final paper</p> <p>2 state that the authors had found malignant</p> <p>3 transformation?</p> <p>4 A. Yes, it did.</p> <p>5 Q. Do you believe the statement that the</p> <p>6 authors had found malignant transformation is</p> <p>7 overinterpreted?</p> <p>8 MS. O'DELL: Object to the form.</p> <p>9 THE WITNESS: No, I don't believe it's</p> <p>10 overinterpreted.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. And what's your basis for that?</p> <p>13 A. That this is work that was done with an</p> <p>14 assay that, once again, is used to identify</p> <p>15 compounds that cause cancer, and that the</p> <p>16 transformation of these benign cells to malignant</p> <p>17 cells is established by this assay.</p> <p>18 Q. Has that ever been shown in</p> <p>19 peer-reviewed literature?</p> <p>20 MS. O'DELL: Objection, form. Asked</p> <p>21 and answered.</p> <p>22 THE WITNESS: I have not done any</p> <p>23 further research on that topic.</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. So the only research you did was</p>
<p style="text-align: right;">Page 91</p> <p>1 Q. I'm asking your opinion, right? Do you</p> <p>2 disagree with that comment?</p> <p>3 A. This comment is being made about a</p> <p>4 manuscript that was not published. What we have,</p> <p>5 the published manuscript is probably different than</p> <p>6 what this reviewer is commenting on.</p> <p>7 Q. Do you have reason to believe that</p> <p>8 Dr. Saed made changes to the results of his study</p> <p>9 that the SGO reviewer said were overinterpreted?</p> <p>10 A. Do I have reason to believe? I think</p> <p>11 common sense would be that a author that submits a</p> <p>12 paper for publication and goes through the</p> <p>13 peer-review process and the reviewer returns</p> <p>14 comments that the author would then respond to</p> <p>15 those comments.</p> <p>16 Q. The reviewer told Dr. Saed -- stated</p> <p>17 that the use of the word "malignant" was improper.</p> <p>18 Did Dr. Saed's final paper use the word "malignant</p> <p>19 transformation"?</p> <p>20 MS. O'DELL: Object to the form.</p> <p>21 Jessica, if that's on the page that's</p> <p>22 displayed on the screen, would you mind --</p> <p>23 or, Asher, would you mind directing us to</p> <p>24 where that's stated.</p> <p>25 BY MS. DAVIDSON:</p>	<p style="text-align: right;">Page 93</p> <p>1 looking at the assay manufacturer's website; is</p> <p>2 that correct?</p> <p>3 MS. O'DELL: Object to the form.</p> <p>4 THE WITNESS: Yes.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. The Gynecological Oncology reviewer</p> <p>7 also said that the dose of talcum powder is</p> <p>8 extremely high.</p> <p>9 Page 70, Asher.</p> <p>10 Do you have an opinion as to whether</p> <p>11 the dose of talcum powder was extremely high?</p> <p>12 MS. O'DELL: Would you point out,</p> <p>13 please, where it says that.</p> <p>14 MR. TRANGLE: This is the bottom,</p> <p>15 reviewer number 2.</p> <p>16 BY MS. DAVIDSON:</p> <p>17 Q. Doctor, do you have an opinion as to</p> <p>18 whether the dose of talcum powder was extremely</p> <p>19 high?</p> <p>20 A. So a researcher can use whatever dose,</p> <p>21 if you will, that they choose to explore. Is this</p> <p>22 extremely high compared to what might thrive on a</p> <p>23 woman's ovaries after using talcum powder? Maybe</p> <p>24 so. I don't know for sure.</p> <p>25 So this is the interpretation -- this</p>



<p style="text-align: right;">Page 94</p> <p>1 is the opinion of this reviewer. I don't know what  2 the reviewer bases his opinion on, what's high,  3 what's low, what's reasonable.  4 Q. This reviewer states that the data are  5 premature, restricted to two cell lines, and really  6 offer no significant mechanistic insight. Do you  7 disagree with that statement?  8 A. Well, premature, I don't agree with it  9 at all because I mean the first time somebody  10 publishes something, that's oftentimes considered  11 premature. It's new information. So it comes out  12 first, then it would be in some people's minds  13 premature. Obviously, additional research needs to  14 be done to establish certain findings.  15 Restricted to two cell lines, well, he  16 used two cell lines. More work needs to be done to  17 get a third, fourth, fifth cell line.  18 And mechanistic insight, I think  19 there's mechanistic insight, not only in this paper  20 but in many others before that talcum powder causes  21 reactive oxygen species, reactive nitrogen species  22 causes secondary to the inflammation that talcum  23 powder causes, which then causes ultimately going  24 down through the whole chain malignant  25 transformation.</p>	<p style="text-align: right;">Page 96</p> <p>1 is inaccurate?  2 MS. O'DELL: Object to the form.  3 THE WITNESS: No.  4 BY MS. DAVIDSON:  5 Q. Would this dose ever replicate  6 physiological dosing?  7 MS. O'DELL: Objection. Form.  8 THE WITNESS: I don't know what  9 physiological dosing is. Many times in  10 pharmaceutical evaluation of drugs when we  11 talk about dose response and toxicity, the  12 drug is given to -- you know, in a  13 laboratory setting to animals or otherwise  14 at a variety of doses. And in some  15 situations defined what the maximum dose is,  16 the researchers will go beyond what is, you  17 know, excessively high dose, and it's  18 recognized that that dose results in severe  19 toxicity and, therefore, that pharmaceutical  20 product dosing is dropped down to where it's  21 safe.  22 So I don't know -- it's not  23 unreasonable to use a high dose when you're  24 investigating the toxicity of a particular  25 drug.</p>
<p style="text-align: right;">Page 95</p> <p>1 Q. And you believe that can all happen  2 within 72 hours?  3 MS. O'DELL: Object to the form.  4 THE WITNESS: I believe that's what  5 this technique is showing in this particular  6 lab, laboratory model, yes.  7 BY MS. DAVIDSON:  8 Q. And, again, that opinion is based  9 solely on the assay company's website and not any  10 published scientific literature; correct?  11 MS. O'DELL: Object to the form.  12 THE WITNESS: And what is in this  13 publication.  14 BY MS. DAVIDSON:  15 Q. You testified a minute ago that you  16 don't know how the peer reviewer decided the dose  17 of talcum powder was extremely high. But if you  18 look at this comment, he specifically states, "I  19 calculate it to be 263MM for the lower dose which  20 is unlikely to ever replicate physiological  21 dosing."  22 Did you calculate what the dose of  23 talcum powder was in this experiment?  24 A. No, I did not.  25 Q. Do you have any reason to believe this</p>	<p style="text-align: right;">Page 97</p> <p>1 BY MS. DAVIDSON:  2 Q. This isn't a drug, though. Do you know  3 whether Dr. Saed used an excessively high dose or  4 not?  5 A. He used -- I don't know how you define  6 excessively high dose.  7 Q. It was your term --  8 A. It was the dose he used.  9 MS. O'DELL: Let him finish.  10 BY MS. DAVIDSON:  11 Q. It was your term.  12 Do you have an opinion as to the  13 whether or not the dose he used was excessively  14 high?  15 A. I don't -- it's the dose -- the dose is  16 what it was.  17 Q. Do you disagree with this peer reviewer  18 that it was extremely high?  19 MS. O'DELL: Object to the form.  20 THE WITNESS: I don't have an opinion  21 about this peer reviewer's comments.  22 BY MS. DAVIDSON:  23 Q. This peer reviewer states that "The use  24 of IHC to determine p53 mutation status is not very  25 sensitive."</p>



<p style="text-align: right;">Page 98</p> <p>1 Do you disagree with that statement?</p> <p>2 MS. O'DELL: Object to the form.</p> <p>3 THE WITNESS: I don't disagree with</p> <p>4 what you read. IHC is used to detect p53</p> <p>5 mutations, both wild type and malignant</p> <p>6 transformation.</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. Is IHC sensitive for detecting p53</p> <p>9 mutation?</p> <p>10 A. Yes.</p> <p>11 Q. And what's your opinion for that based</p> <p>12 on?</p> <p>13 A. Extensive personal experience with</p> <p>14 pathologists sustaining with IHC for p53 mutations</p> <p>15 in ovarian cancers that I've -- in humans, women,</p> <p>16 that I've taken care of.</p> <p>17 Q. The author says that the high dosing</p> <p>18 was a major experimental flaw.</p> <p>19 Do you disagree with that?</p> <p>20 MS. O'DELL: I'm sorry, Jessica, where</p> <p>21 are you reading?</p> <p>22 MS. DAVIDSON: Right there.</p> <p>23 BY MS. DAVIDSON:</p> <p>24 Q. Do you disagree that the dosing was a</p> <p>25 major experimental flaw?</p>	<p style="text-align: right;">Page 100</p> <p>1 THE WITNESS: Yeah, I'm not sure where</p> <p>2 we are.</p> <p>3 MR. TRANGLE: It's number 2 here under</p> <p>4 major comments in the middle of the screen.</p> <p>5 MS. O'DELL: Thank you.</p> <p>6 THE WITNESS: Thank you.</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. My question is do you believe it's</p> <p>9 clear in the paper how an acute 72-hour exposure to</p> <p>10 talc powder leads to cell transformation?</p> <p>11 MS. O'DELL: What's your question?</p> <p>12 THE WITNESS: So I'm not sure. Again,</p> <p>13 I'd have to reread the paper to answer your</p> <p>14 question about whether it's been explained.</p> <p>15 Oftentimes in the explanation about</p> <p>16 a -- in the evaluation of the results of a</p> <p>17 paper, that occurs in the discussion</p> <p>18 section. And, you know, authors choose to</p> <p>19 discuss certain points and disregard other</p> <p>20 points. They can't -- a discussion section</p> <p>21 could go on forever and ever.</p> <p>22 So it was if it was not explained, it's</p> <p>23 not necessarily surprising to me.</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. How can a peer reviewer evaluate the</p>
<p style="text-align: right;">Page 99</p> <p>1 MS. O'DELL: Object to the form.</p> <p>2 THE WITNESS: No. As I said before,</p> <p>3 oftentimes in investigating the dosing of a</p> <p>4 particular drug or a product in this case,</p> <p>5 the researcher will run a gamut of different</p> <p>6 doses to evaluate that particular -- the</p> <p>7 reaction of the response of cells to</p> <p>8 those -- to that tissue in this case, to</p> <p>9 that product, in this case talcum powder.</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. So you disagree with this author's</p> <p>12 statements that it's a major experimental flaw?</p> <p>13 A. Yes.</p> <p>14 Q. Let's move on the PLOS ONE peer review</p> <p>15 comments. The PLOS ONE reviewer states quote --</p> <p>16 Page 101, Asher.</p> <p>17 -- "It was not clear or explained how</p> <p>18 an acute 72-hour exposure to talc powder leads to</p> <p>19 cell transformation."</p> <p>20 Do you believe that it was clear or</p> <p>21 explained in the manuscript in the article how an</p> <p>22 acute 72-hour exposure to talc powder leads to cell</p> <p>23 transformation?</p> <p>24 MS. O'DELL: Doctor, if you need to</p> <p>25 refer to the paper.</p>	<p style="text-align: right;">Page 101</p> <p>1 validity of a scientific paper if it's not</p> <p>2 explained?</p> <p>3 A. I'm sorry, you faded out on me there.</p> <p>4 Q. How can a peer reviewer evaluate the</p> <p>5 validity of a scientific article if it's not</p> <p>6 properly explained?</p> <p>7 MS. O'DELL: Object to the form.</p> <p>8 THE WITNESS: Because peer reviewers</p> <p>9 should have the acumen, if you will, to</p> <p>10 understand what is going on and not have to</p> <p>11 have everything explained to them in the</p> <p>12 discussion -- in the specific paper.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. So are you saying that the fault here</p> <p>15 is with the peer reviewer and not the paper?</p> <p>16 MS. O'DELL: Objection.</p> <p>17 THE WITNESS: The peer reviewer may or</p> <p>18 may not have understood the explanation for</p> <p>19 the acute 72-hour exposure. We don't know</p> <p>20 what did the peer reviewer knows.</p> <p>21 The peer reviewer was asking, as I read</p> <p>22 this, to have an explanation. It doesn't</p> <p>23 mean the peer reviewer doesn't know. Maybe</p> <p>24 the peer reviewer feels like other readers</p> <p>25 should have an explanation so they can</p>

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1 understand.

2 This is the typical peer review process

3 where the peer reviewer offers up

4 suggestions about how one -- how they, that

5 reviewer, might suggest that the paper be

6 enhanced or changed to be more useful.

7 BY MS. DAVIDSON:

8 Q. Dr. Clarke-Pearson, do you believe it

9 was clear and explained in the article how an acute

10 72-hour exposure to talc powder leads to cell

11 transformation?

12 A. I don't think there was an explanation

13 in the article. I'm not sure it's required in the

14 article. Just because this peer reviewer says it

15 wasn't explained doesn't mean that it has to be in

16 the article.

17 Q. Can you please read major comment

18 number 4?

19 A. "Based on the minimal amount of data

20 provided in this manuscript, the authors'

21 conclusions suggests an acute exposure of talcum

22 powder -- talc powder to ovarian epithelial cells

23 associated with ovarian cancer are outrageous and

24 not supported by the manuscript's data."

25 Q. Have you ever received a comment from a

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1 peer reviewer suggesting that any article you wrote

2 was outrageous?

3 MS. O'DELL: Object to the form.

4 THE WITNESS: I've had some pretty

5 unhappy comments from peer reviewers. I'm

6 not sure anybody has used the word

7 "outrageous." I've been unhappy sometimes

8 when I receive peer reviewers' comments back

9 that are, you know, strongly negative and --

10 BY MS. DAVIDSON:

11 Q. But nobody --

12 A. -- have to just deal with that.

13 Q. But nobody has used the word

14 outrageous; correct?

15 A. I'm sorry, I talked over you.

16 Q. I said nobody has ever called your work

17 outrageous; correct?

18 MS. O'DELL: Object to the form.

19 THE WITNESS: I don't recall that.

20 BY MS. DAVIDSON:

21 Q. Do you disagree with the statement?

22 A. Yes, I think that's a little overstated

23 in terms of the emotions that are involved with

24 this comment. I think I would have been -- I was

25 not happy with the way this paper was written. I

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1 would be professional about it and outrageous goes

2 a little bit beyond what I consider professional

3 communication with a colleague.

4 Q. Do you think the authors' conclusions

5 suggesting acute exposure of talc powder to ovarian

6 epithelial cells is associated with ovarian cancer

7 are valid?

8 A. That's what we've been talking about,

9 yes.

10 Q. And that view is based, again, not on

11 any other peer-reviewed literature, but based

12 solely on the assay company's website; correct?

13 MS. O'DELL: Objection to form.

14 THE WITNESS: Yes.

15 BY MS. DAVIDSON:

16 Q. If we could continue, the reviewer

17 states that the "authors would need to conduct a

18 more diverse battery of tests to show that the

19 so-called transformed cells possess a tumor or

20 cancer cell phenotype."

21 Do you disagree with that?

22 A. This is a first of its kind paper. We

23 talked about premature, the word premature, and I

24 was saying this is now the first time this has been

25 published in this format. And, yes, additional

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1 research, additional studies should be done.

2 Q. But you wrote in your report that they

3 demonstrated p53 mutation cell proliferation and

4 malignant transformation?

5 A. Yes. In this -- in this experiment.

6 And doing more experiments with more cell lines,

7 maybe different doses would be perfectly

8 appropriate to continue this line of investigation

9 in the laboratory.

10 Q. But it's your opinion that they have

11 already demonstrated that exposure to Johnson's

12 Baby Powder causes p53 mutations, cell

13 proliferation, and malignant transformation in

14 normal ovarian epithelial cells; correct?

15 MS. O'DELL: Object to the form.

16 Misstates his testimony.

17 BY MS. DAVIDSON:

18 Q. I literally just read from his report.

19 A. Yes. And what I'm saying is I am

20 commenting with regard to this specific paper that

21 more research can be done and should be done, I

22 think, to continue to confirm or not confirm these

23 findings. But these findings are what they are.

24 Q. If we can move on to the next reviewer.

25 This reviewer states that all claims from malignant

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1 transformation should be changed to cell  
2 transformation. Do you agree with that comment?  
3 MS. O'DELL: What are you reading from,  
4 please?  
5 MR. TRANGLE: This is number 5, at the  
6 end of number 5 right above number 6 on the  
7 page.  
8 BY MS. DAVIDSON:  
9 Q. "All claims for malignant  
10 transformation should be changed to cell  
11 transformation."  
12 Do you disagree with that statement?  
13 A. That's a suggestion of the reviewer. I  
14 think that Dr. Harper need to take that under  
15 consideration and make a decision as to whether he  
16 should or shouldn't make that change that the  
17 reviewer is suggesting.  
18 Q. Did they make that change?  
19 A. I believe they stuck with malignant  
20 transformation.  
21 Q. Is cell transformation sufficient to  
22 show malignancy?  
23 A. No. It's a process moving towards  
24 malignancy.  
25 Q. Okay. Page 104. Another peer-reviewed

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1 comment.  
2 MS. O'DELL: So --  
3 BY MS. DAVIDSON:  
4 Q. "The problems with this submission are  
5 too numerous to count, and the science,  
6 methodology, and data cannot be trusted."  
7 Do you see that statement?  
8 MS. O'DELL: Just a moment, please.  
9 Asher, would you mind putting that in the  
10 chat? We don't have access to that page.  
11 MR. TRANGLE: Sure.  
12 BY MS. DAVIDSON:  
13 Q. Dr. Clarke-Pearson, do you see the  
14 sentence on the screen that says, "The problems  
15 with this submission are too numerous to count and  
16 the science, methodology, and data cannot be  
17 trusted"?  
18 MS. O'DELL: Object to the form. I  
19 think if you just give him a moment to read  
20 what's being shown. Not the whole page is  
21 not being shown, just to make sure he has it  
22 available to him.  
23 THE WITNESS: I've read that. That's  
24 what this reviewer is saying.  
25 BY MS. DAVIDSON:

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1 Q. Do you disagree with the reviewer's  
2 statements?  
3 A. I think that reviewer's statement is  
4 just a big overview of details that he's included  
5 in the prior comments. And so one would really  
6 need to go back and address each one of those  
7 comments and this is -- again, this is a reviewers'  
8 comments. Dr. Harper would have taken, in my  
9 opinion, those comments and reevaluated his  
10 manuscript and adjusted the manuscript to not  
11 necessarily follow what the reviewer says, but to  
12 consider what the reviewer is suggesting or saying  
13 and rewrite the manuscript as much as he needed to.  
14 Q. Did Dr. Saed or Harper address any of  
15 these comments to your knowledge?  
16 MS. O'DELL: Object to the form.  
17 THE WITNESS: The way they would  
18 address the comments would be to go back to  
19 their original manuscript, which you and I  
20 don't have -- or I don't have it, maybe you  
21 do, and compare that manuscript with the  
22 manuscript that got published and see where  
23 the differences are in that. Those  
24 differences probably would reflect at least  
25 some of the comments that these reviewers

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1 have been making.  
2 BY MS. DAVIDSON:  
3 Q. Sitting here today, do you know whether  
4 Dr. Saed made any changes to the paper to address  
5 these comments?  
6 A. I have no knowledge one way or the  
7 other on that topic.  
8 Q. Have you ever received peer reviewer  
9 comments saying that your science cannot be  
10 trusted?  
11 MS. O'DELL: Objection.  
12 THE WITNESS: I'm not sure that would  
13 be the terminology that would be -- that  
14 I've seen, but I've seen significant  
15 questions about papers that I've submitted  
16 to asking me to expand or validate and  
17 comment or redo the statistics.  
18 BY MS. DAVIDSON:  
19 Q. But nobody's ever said that your  
20 science cannot be trusted; correct?  
21 MS. O'DELL: Object to form. Misstates  
22 the document.  
23 BY MS. DAVIDSON:  
24 Q. That's correct; right?  
25 MS. O'DELL: Object to the form.

<p style="text-align: right;">Page 110</p> <p>1 Misstates the document. Does not say  2 science.  3 THE WITNESS: You know, nobody's ever  4 said that to me or written that to me.  5 MS. DAVIDSON: Thank you. Let's go off  6 the record.  7 (Recess taken from 11:23 a.m. until 11:34 a.m.)  8 BY MS. DAVIDSON:  9 Q. Dr. Clarke-Pearson, before we left on  10 our break, we were talking about peer-reviewed  11 comments that were submitted with respect to  12 Dr. Saed's paper. And just to recap, there were  13 two peer reviewers for Gynecologic Oncology, two  14 peer reviewers for PLOS ONE, and there were also  15 two peer reviewers for Reproductive Sciences; is  16 that correct?  17 MS. O'DELL: Object to the form. I  18 don't know that all those documents have  19 been shown to Dr. Clarke-Pearson. So not  20 sure that's a fair question.  21 MS. DAVIDSON: I believe it was all  22 part of the same exhibit.  23 Asher, if you want to run through and  24 show on this --  25 MR. TRANGLE: Happy to.</p>	<p style="text-align: right;">Page 112</p> <p>1 findings; is that correct?  2 Asher, you should learn how to  3 highlight.  4 A. Yes, I see that.  5 Q. Okay. So there were two peer reviewers  6 for PLOS ONE; correct?  7 A. That's what it looks like, yes.  8 Q. So that's four reviewers total so far;  9 correct?  10 A. Yes.  11 Q. And are you aware that Reproductive  12 Sciences also rejected this paper?  13 A. I was not aware of that.  14 Q. All right. Are you now --  15 MS. O'DELL: Would you mind letting us  16 know what the Bates Number is at the bottom  17 of this document?  18 MR. TRANGLE: Sure. It's the same --  19 it's the same prefix and it ends in 128.  20 MS. O'DELL: Thank you. Because what  21 you put in the chat is a 284-page document,  22 so --  23 MR. TRANGLE: I can put in the chat the  24 number.  25 MS. O'DELL: I just want to make sure</p>
<p style="text-align: right;">Page 111</p> <p>1 BY MS. DAVIDSON:  2 Q. So we can agree there are peer-reviewed  3 comments from three publications and multiple peer  4 reviewers for each publication.  5 You don't have these with you, Leigh?  6 MS. O'DELL: I have some of these  7 pages, but I don't have all of these pages.  8 As you know, the production for Dr. Saed was  9 pretty extensive. So I do not have  10 everything.  11 MR. TRANGLE: I put it in the chat when  12 I first displayed it. It's all one PDF. So  13 here it says two experts.  14 BY MS. DAVIDSON:  15 Q. Do you see, Dr. Clarke-Pearson, where  16 Gynecologic Oncology says your paper has been  17 reviewed by at least two experts in the field?  18 A. Yes.  19 Q. Okay. Let's move on to the next. So  20 that's GYN Oncology. You agree there were two peer  21 reviewers; correct?  22 A. Yes.  23 Q. PLOS ONE. It says both reviewers have  24 raised serious concerns about the experimental  25 design, analyses, and interpretation of the</p>	<p style="text-align: right;">Page 113</p> <p>1 we understood what we're seeing because I'm  2 not sure that Dr. Clarke-Pearson has been  3 shown this page previously.  4 THE WITNESS: No, I have not seen this  5 one.  6 BY MS. DAVIDSON:  7 Q. Dr. Clarke-Pearson, are you now aware  8 that Reproductive Sciences also rejected this  9 paper?  10 A. That's what I see on the screen, yes.  11 Q. And they also had peer reviewers;  12 correct?  13 A. Yes.  14 Q. And is it typical to have two peer  15 reviewers for each journal? Is that sort of  16 standard operating procedure?  17 A. I think I said earlier in the  18 conversation between you and me that sometimes two,  19 sometimes three.  20 Q. Got it. So at least six peer reviewers  21 felt that this paper was not suitable for  22 publication; correct?  23 A. Yes.  24 Q. How many of these peer-reviewed  25 comments had you read before you wrote your 2023</p>

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1 report?

2 MS. O'DELL: Object to the form.

3 THE WITNESS: I have not -- before I

4 wrote my November 15, 2023, report?

5 BY MS. DAVIDSON:

6 Q. Correct.

7 A. I have not seen any of these comments.

8 Q. When did you first see these comments?

9 A. I believe it was yesterday.

10 Q. Are you familiar with a paper called

11 Mandarinino 2020?

12 A. Yes.

13 MS. DAVIDSON: Let's mark that as

14 Exhibit 10.

15 (Exhibit 10 marked for identification.)

16 BY MS. DAVIDSON:

17 Q. If we could go back to your expert

18 report, which is Exhibit 8, you added citations to

19 Mandarinino; correct?

20 A. Yes. This is a new publication.

21 Q. What does Mandarinino say that supports

22 your opinion here?

23 A. That talcum powder stimulated

24 macrophages to produce increased reactive oxygen

25 species. We've talked about that before. And

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1 changes in gene and expression that could promote

2 pro-tumorigenic environment.

3 Q. You look like you're reading from

4 something. What are you reading from?

5 A. Reading from my report.

6 Q. Do you recognize any of the names of

7 the authors of this paper?

8 A. Let me look. Yes.

9 Q. Which name do you recognize?

10 A. Dr. Godleski.

11 Q. Can you turn to the declaration of

12 interest. Do you see the declaration of interest?

13 A. Yes, I do. It's on the last page

14 before references.

15 Q. Can you read the second sentence in the

16 declaration of interest?

17 A. "JIG has served as an independent

18 expert and provided expert testimony in talc and

19 other environmentally related litigation."

20 Q. Who's JIG?

21 A. I presume it's Dr. Godleski.

22 Q. And Dr. Godleski is a plaintiffs'

23 expert; correct?

24 A. Yes.

25 Q. Does this declaration make clear that

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1 Dr. Godleski testifies on behalf of plaintiffs?

2 A. He says he gives expert testimony in

3 talc and other environmental related litigation.

4 Q. Okay. My question was does this --

5 does this declaration of interest make clear that

6 Dr. Godleski testifies on behalf of plaintiffs?

7 A. I see what you're saying. It doesn't

8 say plaintiff, no.

9 Q. In fact, it says he's an independent

10 expert; correct?

11 A. Yes.

12 Q. How do you understand the term

13 "independent expert"?

14 MS. O'DELL: Object to the form.

15 THE WITNESS: I'm not sure I understand

16 what independent expert means.

17 BY MS. DAVIDSON:

18 Q. Is it your opinion that this paper

19 shows the carcinogenic properties of talc?

20 A. Well, as I said in my report, and I'll

21 just maybe paraphrase it, working with macrophages

22 exposed to talc, the macrophages in that

23 environment increased production of reactive oxygen

24 species. It changed the genes in the macrophages

25 and decreased immune surveillance, all of which

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1 could, would increase the risk of the patient

2 developing cancer or the cancer progressing because

3 of decreased immune surveillance of the macrophages

4 that had been damaged by talcum powder.

5 Q. Dr. Clarke-Pearson, thank you for that.

6 If you could try to answer my questions directly,

7 I'd appreciate it, since we are limited in our

8 time.

9 A. Okay.

10 Q. Although, there's a clear

11 misunderstanding as to how we're limited in our

12 time. I want to make clear again that based on the

13 Court's ruling, I do have 14 hours with you.

14 Dr. Clarke-Pearson, do you believe the

15 study shows the carcinogenic properties of talc;

16 yes or no?

17 MS. O'DELL: Object to the form. Asked

18 and answered.

19 You may answer it in the fashion you'd

20 like.

21 THE WITNESS: I think -- I think it's

22 demonstrating mechanisms that lead to

23 malignant transformation.

24 BY MS. DAVIDSON:

25 Q. The authors state that their study did



<p style="text-align: right;">Page 118</p> <p>1 not investigate the carcinogenic properties of talc  2 per se; correct?  3 A. They say changes -- this is in their  4 abstract. Changes in expression of macrophage  5 genes pertinent in cancer development and  6 immunosurveillance.  7 Q. Do the authors explicitly state that  8 their study did not investigate the carcinogenic  9 properties of talc?  10 MS. O'DELL: Objection.  11 THE WITNESS: I'd have to reread. Do  12 you have a sentence you want to show me that  13 says that?  14 MR. TRANGLE: On the screen it's in the  15 very bottom right-hand corner, last sentence  16 on the page.  17 THE WITNESS: "In our study we did not  18 investigate carcinogenic properties of talc  19 per se."  20 Yes, that's what he says.  21 BY MS. DAVIDSON:  22 Q. You disagree with the authors on that?  23 MS. O'DELL: Object to the form.  24 THE WITNESS: I disagree -- no, I don't  25 disagree with the authors. That's what they</p>	<p style="text-align: right;">Page 120</p> <p>1 humans' correct?  2 A. Sorry. Any effect on what?  3 Q. Phagocytes in humans.  4 MS. O'DELL: Object to the form.  5 THE WITNESS: Phagocytes in humans  6 you're saying?  7 BY MS. DAVIDSON:  8 Q. Uh-huh.  9 A. Not this model that they're using.  10 They weren't using human cells, as I recall.  11 Q. And they didn't test whether talc has  12 any kind of mutagenic or transformative effect on  13 human cells of any kind; correct?  14 MS. O'DELL: Object to the form.  15 THE WITNESS: That's correct. They  16 used an animal model that's common in  17 laboratory research.  18 BY MS. DAVIDSON:  19 Q. In fact, they used rodent cells; right?  20 A. I'd have to look at the specifics. I  21 know they weren't human cells.  22 Q. And did the authors determine whether  23 the changes they found were unique to talc?  24 MS. O'DELL: Would you mind repeating  25 the question, please? I couldn't hear it.</p>
<p style="text-align: right;">Page 119</p> <p>1 said. They weren't -- no, I mean, I don't  2 disagree with them.  3 BY MS. DAVIDSON:  4 Q. Did the authors investigate whether the  5 activity they discovered would involve an increased  6 likelihood of tumor growth?  7 A. They say what they found were changes  8 that were -- and I'm quoting from them -- pertinent  9 in cancer development. It doesn't say it caused  10 cancer development. These are steps leading up to  11 cancer development that they are identifying in  12 their research project.  13 Q. So this paper does not show the  14 initiation of cancer in ovarian cells from talc;  15 correct?  16 MS. O'DELL: Objection.  17 THE WITNESS: Would you repeat the  18 specific about your comments about cancer?  19 BY MS. DAVIDSON:  20 Q. This paper does not show the initiation  21 of cancer in ovarian cells from talc; correct?  22 A. That's my understanding. That's  23 correct.  24 Q. And the authors also did not show  25 whether talc has any effect on phagocytes in</p>	<p style="text-align: right;">Page 121</p> <p>1 Excuse me. Would you mind repeating the  2 question, please? I'm sorry, I couldn't  3 hear that.  4 BY MS. DAVIDSON:  5 Q. Did the authors determine whether the  6 changes they found are unique to talc?  7 A. They were unique to talc when they  8 compared it with other products such as titanium  9 dioxide, urban air concentration, and diesel  10 exhaust particles.  11 Q. If we could turn to page 9, sentence  12 beginning, "We also did not aim."  13 MR. TRANGLE: The bottom of the left  14 column.  15 BY MS. DAVIDSON:  16 Q. Can you read the sentence that begins  17 "We also did not aim."  18 Asher, if you could highlight it.  19 A. I see it.  20 Q. Can you read that sentence aloud?  21 A. So we did not -- let me look at it.  22 "we did not aim to determine whether the changes we  23 found are unique to talc. The focus of our  24 experiments was to demonstrate whether talc is  25 inert when phagocytized in a high-estrogen milieu."</p>



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1 That was their intent.

2 Q. So they did not aim to determine

3 whether the changes were unique to talc; correct?

4 MS. O'DELL: Objection to form.

5 THE WITNESS: Well, there may be other

6 products that could cause similar changes.

7 The products that they used that I just

8 identified, including titanium oxide, did

9 not cause the same changes that talc did.

10 BY MS. DAVIDSON:

11 Q. And did this study examine gene

12 expression levels or mutations?

13 A. I think it looked at gene expression

14 models.

15 Q. Is a change in gene expression the same

16 as inducing a mutation?

17 A. No.

18 Q. Do changes in gene expression levels

19 always lead to carcinogenesis?

20 A. No.

21 Q. Did this study use already malignant

22 ovarian cancer cells?

23 A. I believe they did.

24 Q. Okay. Let's move on to Exhibit 11, Emi

25 2021.

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1 A. I'm sorry, what are you going to?

2 Q. Exhibit 11. We're going to put it up

3 on the screen. Emi 2021.

4 (Exhibit 11 marked for identification.)

5 BY MS. DAVIDSON:

6 Q. Emi '21, "Transcriptomic and epigenomic

7 effects of insoluble particles on J774 of

8 macrophages." Are you familiar with that paper?

9 MS. O'DELL: Let me get it in front of

10 him. Okay.

11 BY MS. DAVIDSON:

12 Q. Dr. Clarke-Pearson, you cited this

13 paper in your report; correct, in your supplemental

14 report?

15 A. Yes.

16 Q. Why?

17 A. Because it, again, is a new in vitro

18 research paper that shows the effect of talcum

19 powder on cell proliferation, immune response and

20 signaling, immunosurveillance, and apoptosis. So

21 all those things that can lead to ovarian cancer.

22 Q. Does the study examine effects on human

23 ovarian cells?

24 A. Let me just double-check.

25 No. I think it's again a murine model,

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1 a mass model.

2 Q. And what type of cell does it look at?

3 MS. O'DELL: Object to the form. Asked

4 and answered.

5 THE WITNESS: Well, they were

6 chromosomally female cells which is relevant

7 to women getting ovarian cancer and widely

8 used in macrophage and phagocyte --

9 phagocyte model cell lines.

10 BY MS. DAVIDSON:

11 Q. It discusses the effects on

12 macrophages; right?

13 A. Yes.

14 Q. Are those ovarian cells?

15 A. No. These are macrophages. Part of

16 the immune system that is stimulated by reactive

17 oxygen species in chronic inflammation.

18 Q. What did Emi find about titanium

19 dioxide?

20 MS. O'DELL: Objection. Form.

21 BY MS. DAVIDSON:

22 Q. Do you recall whether this paper found

23 that titanium dioxide also leads to gene expression

24 and transcription changes in phagocytes?

25 A. I'd have to reread it. I believe that

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1 it does to a lesser degree.

2 Q. Does that surprise you?

3 A. Not necessarily. I mean, it's a

4 foreign body as well that can simulate an

5 inflammatory response, but apparently not as much

6 as talcum powder.

7 Q. So both talcum powder and the supposed

8 control, which is titanium dioxide, led to changes

9 in phagocytes; correct?

10 MS. O'DELL: Object to form.

11 THE WITNESS: I'm sorry, you'll --

12 would you please repeat that question. I

13 didn't hear it?

14 MS. DAVIDSON: Did you get the

15 question, court reporter?

16 (The reporter read back the last question.)

17 THE WITNESS: And my answer is yes.

18 BY MS. DAVIDSON:

19 Q. Does Emi say anything about

20 carcinogenesis?

21 MS. O'DELL: Object to the form.

22 THE WITNESS: Not that I recall.

23 BY MS. DAVIDSON:

24 Q. And, again, it doesn't use human cells;

25 correct?

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1 A. No, it doesn't. It uses mouse cells.  
2 Q. And it doesn't use ovarian cells;  
3 correct?  
4 A. That's correct.  
5 Q. And it looks at gene expression, not  
6 malignancy; correct?  
7 MS. O'DELL: Object to the form.  
8 THE WITNESS: It identifies gene  
9 expression, yes.  
10 BY MS. DAVIDSON:  
11 Q. So this paper does not examine whether  
12 talc causes mutations; correct?  
13 MS. O'DELL: Objection, form.  
14 THE WITNESS: It doesn't identify  
15 mutations, you're correct.  
16 BY MS. DAVIDSON:  
17 Q. So how does the study support your  
18 opinion that talc causes ovarian cancer?  
19 A. Would you repeat that question?  
20 MS. DAVIDSON: Court reporter.  
21 (The reporter read back the last question.)  
22 THE WITNESS: Right. So these are all  
23 studies showing mechanisms that result from  
24 chronic inflammation caused by talc. And  
25 those properties that are induced, that

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1 inflammation reactive oxygen species, immune  
2 alterations, alterations apoptosis, many  
3 other things are all components of what  
4 results in the development of ovarian cancer  
5 caused by talc.  
6 BY MS. DAVIDSON:  
7 Q. Is it still your opinion that the  
8 mechanism by which talc allegedly causes ovarian  
9 cancer is through inflammation?  
10 A. Absolutely.  
11 (Exhibit 12 marked for identification.)  
12 Q. If we can mark as Exhibit 12 Phung  
13 2022. In your report, you cite this paper, Phung  
14 2022. Do you recall that?  
15 A. I do.  
16 Q. Do you know who the authors were of  
17 this paper?  
18 A. It's a consortium. There's multiple  
19 authors.  
20 Q. Do you recognize the name Daniel  
21 Cramer?  
22 A. I'm sorry, what about Daniel Cramer?  
23 Q. Do you recognize that name?  
24 A. Yes.  
25 Q. How do you recognize his name?

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1 A. He's been involved with several  
2 peer-reviewed publications regarding talcum powder  
3 causing ovarian cancer.  
4 Q. Is he a plaintiffs' expert in this  
5 litigation?  
6 A. I believe he has been.  
7 Q. If we could turn to his disclosure.  
8 A. Where is that? At the end of the  
9 paper?  
10 Q. Asher is putting it up on the screen.  
11 MS. O'DELL: Published version.  
12 MS. DAVIDSON: I'm going to read his  
13 disclosure aloud to you.  
14 BY MS. DAVIDSON:  
15 Q. "DWC reports payments for expert  
16 testimony from Ferraro Law Firm and Ashcraft and  
17 Gerel Law Firm."  
18 Do you see that?  
19 A. I just found it, yes.  
20 Q. Does this sentence state whether  
21 Dr. Cramer is an expert for plaintiffs or for  
22 defendants?  
23 MS. O'DELL: Object to the form.  
24 THE WITNESS: He doesn't -- he doesn't  
25 say plaintiff or defendant.

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1 BY MS. DAVIDSON:  
2 Q. Does it say that he's an expert in talc  
3 litigation?  
4 A. No. It says he's an expert working  
5 with these two law firms and also with grant  
6 funding from NIH.  
7 Q. Someone reading this disclosure would  
8 not know that Dr. Cramer is an expert for  
9 plaintiffs in talc litigation; correct?  
10 MS. O'DELL: Object to the form.  
11 THE WITNESS: I don't have an opinion  
12 about what people would know.  
13 BY MS. DAVIDSON:  
14 Q. Does this sentence make clear that  
15 Dr. Cramer is an expert for plaintiffs in talc  
16 litigation?  
17 A. No.  
18 Q. Thank you. Let's move on to mark as  
19 Exhibit 13 Woolen 2022. We've talked about this  
20 paper; correct?  
21 A. Yes.  
22 (Exhibit 13 marked for identification.)  
23 BY MS. DAVIDSON:  
24 Q. This is the paper that you sent to ACOG  
25 and SGO; correct?

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1 A. Yes.

2 Q. Following those submissions by you to

3 ACOG and SGO, did they change any of their public

4 statements with respect to talc?

5 A. I'm not aware of any changes.

6 Q. Following your submissions to ACOG and

7 SGO, have they issued any statements suggesting

8 that talc is a risk factor for ovarian cancer?

9 A. Not that I'm aware of.

10 Q. Okay. Have you read

11 Dr. Smith-Bindman's reports in this litigation?

12 A. Her report?

13 Q. Uh-huh.

14 A. I have not read her expert report, no.

15 Q. And, as a result, you're not aware that

16 Dr. Smith-Bindman began this -- the meta-analysis

17 that led to Woolen paper in her litigation report;

18 is that correct?

19 MS. O'DELL: Object to the form.

20 Misstates the evidence.

21 THE WITNESS: I'm not aware.

22 BY MS. DAVIDSON:

23 Q. Were you aware that Dr. Smith-Bindman

24 did a meta-analysis for this litigation before this

25 paper was published?

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1 A. I was not aware.

2 Q. Were you aware that Dr. Woolen received

3 Dr. Smith-Bindman's litigation report before

4 setting out to do the study?

5 MS. O'DELL: Objection. Form.

6 THE WITNESS: I was not aware of that.

7 BY MS. DAVIDSON:

8 Q. And you were not aware that 9 of the 11

9 studies in this paper had already been the subject

10 of a litigation meta-analysis; correct?

11 MS. O'DELL: Objection to the form.

12 THE WITNESS: I was not aware of that

13 either.

14 BY MS. DAVIDSON:

15 Q. Are you familiar with the term "post

16 hoc analysis"?

17 A. Somewhat, yes.

18 Q. What does that mean?

19 A. It means after the study has been done,

20 somebody -- not necessarily the primary researcher,

21 but somebody could have access to the database and

22 reanalyze the database or, you know, asking another

23 question that might be contained in the data that's

24 there.

25 Q. Do post hoc analyses raise any issues

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1 with respect to scientific integrity?

2 MS. O'DELL: Object to the form.

3 THE WITNESS: No. I think scientific

4 integrity obviously ties back to

5 publication. Otherwise, if it's just

6 sitting on somebody's desk, it's not --

7 doesn't mean anything.

8 So that integrity goes through the peer

9 review process before it gets published.

10 And identifying, you know, in the manuscript

11 that it's a post hoc analysis is important

12 for full disclosure.

13 BY MS. DAVIDSON:

14 Q. Is the reliability of a meta-analysis

15 contingent on proper selection of studies and data

16 sets?

17 MS. O'DELL: Objection.

18 THE WITNESS: I would say yes.

19 BY MS. DAVIDSON:

20 Q. Did Woolen 2022 include the prospective

21 data from the O'Brien 2020 pooled analysis?

22 MS. O'DELL: Objection. Form.

23 THE WITNESS: It obtained -- it

24 included information supplied by O'Brien

25 from the Minerva health study one that, as I

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1 understand it, had not been published

2 previously.

3 BY MS. DAVIDSON:

4 Q. Do you know why Woolen 2022 did not

5 include prospective data from O'Brien 2020

6 published?

7 MS. O'DELL: Objection to form.

8 THE WITNESS: The data in 2020 is

9 different than the data that was supplied by

10 O'Brien for this Woolen paper.

11 BY MS. DAVIDSON:

12 Q. Do you know what the reason for that

13 is?

14 A. Because O'Brien hadn't published

15 previously on daily exposure in the previously

16 published national health study -- national health

17 study participants.

18 Q. Did O'Brien 2022 use the term

19 "frequent exposure"?

20 A. I have to go back to O'Brien 2020.

21 MS. DAVIDSON: Why don't we mark

22 O'Brien 2020. We haven't marked that yet --

23 oh, I think we did actually.

24 MR. TRANGLE: We did.

25 MS. DAVIDSON: O'Brien 2020 was

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1 Exhibit 6. Let's put that up, Asher,  
2 because we want to move things along and  
3 then we'll come back to this.  
4 BY MS. DAVIDSON:  
5 Q. If you could turn --  
6 Dr. Clarke-Pearson, if you could look up on the  
7 screen just to move things along. Do you see where  
8 it says exposure -- "exposures" in the abstract?  
9 A. Looking at the abstract.  
10 Q. Do you see on the screen the word  
11 "exposures"?  
12 A. There's lots of words on the screen.  
13 Q. There's a heading on the screen.  
14 A. I gotcha. Okay.  
15 Q. Can you read what it says?  
16 A. Yeah. It says, "Exposures. Ever,  
17 long-term greater than 20 years and frequent  
18 greater than once a week.  
19 Q. Okay. So --  
20 A. Equal and once a week, yeah.  
21 MS. O'DELL: I don't think he was  
22 finished.  
23 BY MS. DAVIDSON:  
24 Q. So before Woolen was ever published,  
25 O'Brien had already defined the term "frequent;" is

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1 that correct?  
2 MS. O'DELL: Object to the form.  
3 THE WITNESS: I think it's --  
4 MS. O'DELL: Object to the form. You  
5 may answer.  
6 BY MS. DAVIDSON:  
7 Q. Dr. Clarke-Pearson --  
8 A. I think --  
9 MS. O'DELL: Let him finish his answer,  
10 please, Jessica.  
11 BY MS. DAVIDSON:  
12 Q. Dr. Clarke-Pearson, I just was going to  
13 repeat the question because there was so much  
14 chatter by Leigh. Before --  
15 A. Okay. Go ahead.  
16 MS. O'DELL: Oh, yes.  
17 BY MS. DAVIDSON:  
18 Q. Before Dr. Woolen published her  
19 meta-analysis, Dr. O'Brien in her paper had defined  
20 the term "frequent" as greater or equal to one  
21 week; is that correct?  
22 MS. O'DELL: Object to the form.  
23 BY MS. DAVIDSON:  
24 Q. Once a week?  
25 MS. O'DELL: Object to the form.

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1 THE WITNESS: I believe that's what  
2 they report in this 2020 paper, yes.  
3 BY MS. DAVIDSON:  
4 Q. Does Dr. Woolen explain anywhere in her  
5 paper why she decided to deviate from Dr. O'Brien's  
6 definition of the word "frequent"?  
7 MS. O'DELL: Objection to form.  
8 THE WITNESS: Well, she -- I mean  
9 frequent can have many definitions. And  
10 Dr. Woolen has chosen the definition that's  
11 slightly different than the definition that  
12 Dr. O'Brien used in the 2020 paper.  
13 BY MS. DAVIDSON:  
14 Q. How many of the papers -- we can go  
15 back to Woolen, Asher.  
16 How many of the papers cited in Woolen  
17 involved two days per week of use?  
18 A. As I review -- as I see Table 2, it  
19 would appear that all those papers would be at  
20 least two days per week.  
21 Q. Do any of them involve two or three  
22 days per week of use?  
23 MS. O'DELL: Object to form.  
24 THE WITNESS: Not that I see in the  
25 column on Table 2.

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1 BY MS. DAVIDSON:  
2 Q. Do any of them involve four days a week  
3 of use?  
4 MS. O'DELL: Objection to the form.  
5 THE WITNESS: They could.  
6 BY MS. DAVIDSON:  
7 Q. Which would that be?  
8 A. Four days -- four days per week, for  
9 example, Chang, 25 times per month. That's  
10 almost -- that's almost daily if you exclude her  
11 menstrual period during that month. So that would  
12 be every day of that month the patient in the Chang  
13 studies were exposed. So that's four or five or  
14 six days per week.  
15 Q. Are any of them limited to just four  
16 days per week?  
17 MS. O'DELL: Objection to the form.  
18 THE WITNESS: Mills says four to seven  
19 times per week.  
20 BY MS. DAVIDSON:  
21 Q. Do you know if Dr. Woolen used the data  
22 from Mills for four times per week?  
23 A. I have no reason to think she didn't.  
24 Q. When you said excluded menstrual  
25 period, what did you mean?

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1 Asher, we're seeing your e-mail, so  
2 please turn off your screen.  
3 When you said excluded -- excluding  
4 menstrual period, what did you mean by that?  
5 A. What do I mean?  
6 Q. Uh-huh.  
7 A. Well, most women in this study were  
8 premenopausal and likely, in my humble opinion,  
9 were having a menstrual period once a month. So if  
10 we look at 30 days per month on an average month,  
11 several of those days when the patient is having  
12 her menstrual period and those women may or may not  
13 be using talcum powder during that time. But 25  
14 times per month is not necessarily 30 times per  
15 month like every day, but 25 times per month would  
16 expose the patient, to answer your question, to  
17 four times per week for sure.  
18 Q. But that would be much more than four  
19 times per week; correct?  
20 A. It could be.  
21 Q. Well, if you take 30 and you divide it  
22 by 25, that's almost every day; right?  
23 A. 25 out of 30 is almost every day, yes.  
24 Q. I was asking if you're aware of any  
25 data they used based on use only four days a week?

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1 A. I didn't understand your question that  
2 way. Could you repeat it now?  
3 Q. Are you aware of any data used by  
4 Woolen that involved use of just four days per  
5 week?  
6 A. Woolen defined frequent use as two or  
7 more times per week. So four times per week is  
8 greater than two times per week. So she included  
9 patients that had four times per week.  
10 Q. Which of the underlying papers used by  
11 Woolen involved use just two to four times per  
12 week?  
13 MS. O'DELL: Objection to form.  
14 THE WITNESS: I'm not aware of any of  
15 those papers that were just two times per  
16 week. All of them were more than -- all of  
17 them were more than two times per week.  
18 BY MS. DAVIDSON:  
19 Q. Are you aware of any papers that were  
20 just three times a week?  
21 MS. O'DELL: Object to form.  
22 THE WITNESS: No.  
23 BY MS. DAVIDSON:  
24 Q. Are you aware of any papers that were  
25 just four times per week?

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1 A. I think you just asked me that  
2 question.  
3 Q. Your answer was not clear?  
4 A. My answer was that four times per week  
5 is in the Mills study.  
6 Q. Dr. Clarke-Pearson, why would a woman  
7 who has her period not use talcum powder?  
8 A. It's a personal preference. I mean, I  
9 don't know. I'm not a woman and I've never used  
10 talcum powder. I've never been around anybody that  
11 I can personally say used talcum powder to give me  
12 just an informal answer. So, I mean, obviously I'm  
13 aware of studies where women have used talcum  
14 powder on their perineal pad when they're having  
15 their period.  
16 Q. I just wanted to understand the basis  
17 for your statement earlier about taking out the  
18 time that a woman has her period?  
19 A. Well, I think exposure to talcum powder  
20 is more likely when the patient is not having her  
21 period when the reproductive tract doesn't have  
22 blood flowing out of it. So talcum powder can  
23 ascend to the ovary and tubes.  
24 Q. So is it your opinion that talcum  
25 powder is less likely to ascend a woman's genital

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1 tract when she has her period?  
2 A. Yes.  
3 MS. DAVIDSON: All right. Let's go off  
4 the record for five minutes.  
5 (Recess taken from 12:13 p.m. until 12:23 p.m.)  
6 BY MS. DAVIDSON:  
7 Q. Dr. Clarke-Pearson, would it have been  
8 more accurate for the Woolen paper to have defined  
9 frequent use as four days or more of use given what  
10 you saw in Table 2?  
11 MS. O'DELL: Object to the form.  
12 BY MS. DAVIDSON:  
13 Q. Table 1. Sorry. Was it -- wait.  
14 MS. O'DELL: Object to the form.  
15 MS. DAVIDSON: Let me just make sure  
16 I've got the right table.  
17 MR. TRANGLE: It's 2.  
18 MS. DAVIDSON: Asher, can you put it  
19 back up on the screen. I think it's Table  
20 2. I think I had it right the first time.  
21 So let me just re-ask the question.  
22 BY MS. DAVIDSON:  
23 Q. Based on our review before the break of  
24 Table 2, would it have been more accurate to define  
25 this study as looking at use of four days or more



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1 per week?

2 MS. O'DELL: Object to the form.

3 THE WITNESS: So now you're sounding

4 exactly like the peer reviewers, looking at

5 a paper and then saying, well, maybe it

6 should be looked at differently.

7 My answer to you is this is what

8 Dr. Woolen chose to use, greater than two

9 times per week. She could have looked at it

10 at four times per week.

11 BY MS. DAVIDSON:

12 Q. But, Dr. Clarke-Pearson, she did look

13 at it as only four times per week or more; correct?

14 We concluded before the break that Table 2 does not

15 show any data for use between two and four days a

16 week; right?

17 MS. O'DELL: Object to the form.

18 THE WITNESS: Between two and four days

19 per week. No, I mean you had asked me about

20 four days a week, and I cited the Mills

21 paper.

22 BY MS. DAVIDSON:

23 Q. Right. So, Dr. Clarke-Pearson, the

24 Woolen paper does not use any data for two or three

25 days per week of use; correct?

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1 MS. O'DELL: Objection to the form.

2 THE WITNESS: It used two or greater

3 days per week, is that what you're --

4 BY MS. DAVIDSON:

5 Q. Two or three?

6 A. Two or three.

7 MS. O'DELL: Object.

8 THE WITNESS: No, I don't -- it would

9 have included three. Two or more days per

10 week would include three.

11 BY MS. DAVIDSON:

12 Q. If someone used -- if there were papers

13 that reported on talc use for two or three times

14 per week, was that covered in Table 2?

15 MS. O'DELL: Object to the form.

16 THE WITNESS: Those patients would be

17 included in Table 2.

18 BY MS. DAVIDSON:

19 Q. Patients who only used talc two or

20 three days a week are included in Table 2?

21 A. Two or more days per week are included

22 in Table 2.

23 Q. Where in Table 2 can you point me to

24 patients who use talc either two days a week or

25 three days a week?

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1 A. So I think what you're trying to say is

2 specifically only two days per week or only three

3 days per week. Is that what you're trying to say?

4 Q. Correct, sir.

5 A. I see. So there's no specific

6 identification of that sort of patient.

7 Q. So wouldn't it be more accurate if this

8 paper stated that it defined frequent use as four

9 or more days per week?

10 MS. O'DELL: Object to the form.

11 THE WITNESS: They could have, but they

12 chose to use greater than two days per week.

13 BY MS. DAVIDSON:

14 Q. But where are the data for two or three

15 days per week?

16 MS. O'DELL: Objection. Form.

17 THE WITNESS: This is greater than two

18 days per week. All these studies, the 11

19 studies of patients that receive -- that use

20 talcum powder two or more days per week.

21 BY MS. DAVIDSON:

22 Q. But, in fact, the only data used by

23 Woolen are people who use talc four or more days

24 per week; correct?

25 MS. O'DELL: Object to the form.

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1 THE WITNESS: I think that probably

2 would be correct.

3 BY MS. DAVIDSON:

4 Q. Do you know if there are data available

5 anywhere from any of these studies that would

6 reflect two or three days per week of use?

7 A. Not that I know of in these studies,

8 no.

9 Q. Would you be surprised to learn that

10 some of these studies do include data for use that

11 correlates to two or three days per week?

12 MS. O'DELL: Object to the form.

13 THE WITNESS: If they use two or three

14 days per week, then they would have been

15 using two or more days per week which would

16 be included in this analysis.

17 BY MS. DAVIDSON:

18 Q. So it's your testimony that if any of

19 the studies listed in Table 2 provided data for two

20 days per week of use, they would have been included

21 here; correct?

22 MS. O'DELL: Objection. Form.

23 THE WITNESS: Two or more days per week

24 would be included in this study, yes.

25 BY MS. DAVIDSON:

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1 Q. Are you aware that when it came to  
2 O'Brien the Woolen authors only used data for  
3 patent women?  
4 A. I didn't hear your whole question. I'm  
5 sorry.  
6 Q. Are you aware that the Woolen authors  
7 only used data for patent women from the NHS1  
8 study?  
9 A. Yes. And that was harmonized with many  
10 of the other studies -- of the other ten where the  
11 authors chose to only focus on patients that had  
12 patent fallopian tubes and an intact uterus.  
13 Q. Can you point to a single one of those  
14 ten studies that only focuses on patent women?  
15 A. I would have to go back to those  
16 studies and look at them, but I know there are some  
17 in there.  
18 Q. So it's your testimony that some of  
19 those ten studies are reported in Table 2 only for  
20 patent women?  
21 A. That included only patency, yes.  
22 Q. How many of the ten?  
23 A. I don't know. I just told you. I'd  
24 have to go back and look at them. That's why they  
25 harmonized. You wouldn't harmonize with patients

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1 that didn't have patency and report it under  
2 footnote number 5.  
3 Q. Would it surprise you that not a single  
4 one of those ten other studies actually was  
5 restricted to women with patent reproductive  
6 tracts?  
7 MS. O'DELL: Objection to form.  
8 THE WITNESS: Again, I would have to  
9 look at those studies once again.  
10 BY MS. DAVIDSON:  
11 Q. Would it surprise you, if it were the  
12 case, that not one of those ten studies was limited  
13 to women with patent reproductive tracts?  
14 MS. O'DELL: Objection to the form.  
15 THE WITNESS: I don't know because I  
16 would have to look at these studies again.  
17 BY MS. DAVIDSON:  
18 Q. But you testified a few moments ago  
19 that it was done to harmonize with these other ten.  
20 Is that still your testimony?  
21 A. That's what the author says in footnote  
22 number 5.  
23 Q. Do you know if that's accurate?  
24 A. I believe it is.  
25 Q. What is that belief based on?

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1 A. My understanding is that some of these  
2 other studies 1 through 10 included -- focused only  
3 on patients with patent fallopian tubes.  
4 Q. What's that understanding based on?  
5 A. On having previously read these papers.  
6 But I at this moment cannot tell you which papers  
7 have patency as their criteria.  
8 Q. Do you have an opinion as to whether  
9 it's some, most, of those ten?  
10 A. I'd have to review those papers.  
11 Q. If none of the studies in 1 through 10  
12 is restricted to women with patent reproductive  
13 tracts, would that footnote that we just looked at  
14 about harmonization be inaccurate?  
15 MS. O'DELL: Object.  
16 THE WITNESS: Is a hypothetical  
17 question if none of them had patency?  
18 BY MS. DAVIDSON:  
19 Q. If none of those ten studies is limited  
20 to patency, then is footnote number 5 about  
21 harmonization inaccurate?  
22 MS. O'DELL: Object to form.  
23 THE WITNESS: Hypothetical case, yes.  
24 But I don't know why they would say  
25 harmonize if there were none that had

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1 patency as part of their criteria.  
2 BY MS. DAVIDSON:  
3 Q. Okay. Could we look at the data that  
4 are listed here for Wu on line 10.  
5 A. I see it.  
6 MS. DAVIDSON: Great, Asher. Asher has  
7 mastered highlighting. Excellent.  
8 THE WITNESS: Yeah, that's terrific.  
9 Thank you, Asher.  
10 MS. DAVIDSON: Let's do that going  
11 forward, Asher. I was going to ask you on a  
12 break to chat with a paralegal and figure it  
13 out, and we're glad you've mastered that  
14 important skill that they do not teach in  
15 law school.  
16 BY MS. DAVIDSON:  
17 Q. Dr. Clarke-Pearson, we're looking at  
18 the Wu study, right, that's a case-control study  
19 from 2009. You read that study before; correct?  
20 A. Yes.  
21 Q. And the data provided here for Wu says  
22 greater than 30 times per month; correct?  
23 A. Yes.  
24 Q. And so how many times per week is that?  
25 A. Well, assuming that there's a 30 to

Page 150

1 31 days a month, it seems like it would be every  
2 day.  
3 Q. Correct. Do you know whether Wu -- do  
4 you recall from your review of that paper whether  
5 it also provided -- you can leave that, Asher.  
6 Are you familiar whether Wu also  
7 provided data with respect to women who used talc  
8 ten times per month?  
9 MS. O'DELL: Object to the question --  
10 or to, one, we need to get the paper in  
11 front of Dr. Clarke-Pearson. Wu is a study  
12 that was produced sometime ago. It was  
13 involved -- or was cited in his first report  
14 and he was examined it on during his first  
15 deposition. So just wait a moment and we'll  
16 put it in front of him.  
17 BY MS. DAVIDSON:  
18 Q. I would just like to note for the  
19 record that Ms. O'Dell is objecting to my asking  
20 about a study that's included in a paper that's in  
21 your current report.  
22 Dr. --  
23 MS. O'DELL: That's not the basis of my  
24 objection. I'm just saying this is not a  
25 memory test. And he is entitled to see a

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1 study that he's being asked about, specific  
2 questions about the data. That's all. And  
3 just give him a moment and he's happy to  
4 answer your questions. But we just need to  
5 get the study in front of him.  
6 BY MS. DAVIDSON:  
7 Q. Dr. Clarke-Pearson, do you know  
8 whether -- what are you looking at right now?  
9 A. I'm looking at the paper trying to  
10 find --  
11 Q. Which paper?  
12 A. -- the information that you're asking  
13 me about with regard --  
14 Q. Which paper?  
15 A. -- to utilization.  
16 What's that?  
17 Q. Which paper are you looking at?  
18 A. The Wu paper. That's what we're  
19 talking about, isn't it?  
20 Q. Because we're doing this by video, I'd  
21 appreciate it if you let me know when you're  
22 looking at something that isn't up on the screen.  
23 A. Oh, certainly. This is Wu 2015.  
24 Q. Do you have an --  
25 A. You want to put it up on the screen for

Page 152

1 me? I'd be happy to --  
2 Q. Do you have notes on Wu 2015?  
3 A. No, I don't.  
4 Q. Okay. Do you know whether --  
5 A. 2009.  
6 Q. Do you know whether Wu provided --  
7 there's a lot of movement in the room.  
8 A. I'm being handed a copy of the paper  
9 you want to talk about, which is 2009.  
10 Q. Dr. Clarke-Pearson, do you know whether  
11 Wu 2009 provided data from multiple time periods of  
12 use?  
13 A. I don't recall.  
14 Q. Do you know whether they provided data  
15 for multiple frequencies of use?  
16 A. I'm looking at a table that says yes.  
17 Be happy to look at that table with you if you  
18 like.  
19 Q. Dr. Clarke-Pearson, if somebody uses a  
20 product ten times per month or more, how many days  
21 per week is that?  
22 A. You're averaging this out, so that  
23 would be probably on average three days per week.  
24 Q. So that would be more than two days;  
25 right?

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1 A. Yes.  
2 Q. So if the Wu study had provided data  
3 for use ten times per month, that would have  
4 satisfied the Woolen criteria of more than two  
5 times per week; correct?  
6 MS. O'DELL: Object to form.  
7 THE WITNESS: I think we just averaged  
8 that out. So 10 times per month, so 10 --  
9 10 out of 30, let's call a month 30 days, so  
10 that's one out of three days. So that would  
11 be two or three times per week.  
12 BY MS. DAVIDSON:  
13 Q. So if Wu had reported data for use ten  
14 times or more per month, that would have satisfied  
15 the frequent definition used by Woolen; correct?  
16 MS. O'DELL: Objection. Form.  
17 THE WITNESS: I believe it would.  
18 BY MS. DAVIDSON:  
19 Q. But Woolen only used the data for 30  
20 times or more per month; correct?  
21 A. That's what I think I recall from  
22 the -- the table you had up earlier.  
23 Q. We can put Table 2 back up. Do you  
24 know why Woolen would have used data for 30 times  
25 per month as opposed to data for 10 times per

Page 154

1 month?

2 A. I can only speculate as to what

3 Dr. Woolen was thinking. Maybe ten times per month

4 didn't satisfy her criteria for greater than two

5 times per month -- or per week.

6 Q. But we've just done the math and ten

7 times per month is more than two times per week;

8 correct?

9 MS. O'DELL: Object to form.

10 THE WITNESS: That's on average.

11 BY MS. DAVIDSON:

12 Q. Just the same way that 30 times per

13 month on average is once a day; correct?

14 A. That's correct.

15 Q. Okay. Let's move on.

16 Do you know how Woolen came to the

17 conclusion that two times a week reflects frequent

18 use?

19 A. No, I don't.

20 Q. Are you aware that in

21 Dr. Smith-Bindman's expert report she also defined

22 regular use, and she defined that as three times

23 per week?

24 MS. O'DELL: Object to form.

25 THE WITNESS: You called it -- I'm

Page 155

1 sorry, I don't recall. She called it what

2 did you say?

3 BY MS. DAVIDSON:

4 Q. Are you aware that Dr. Smith-Bindman's

5 meta-analysis for the litigation was based on

6 defined regular use as three times per week?

7 MS. O'DELL: Objection.

8 THE WITNESS: I think I already

9 indicated I hadn't read her report, so I

10 don't recall that.

11 BY MS. DAVIDSON:

12 Q. And, therefore, you also don't know why

13 she changed her exposure metric from three times

14 per week to two times per week; correct?

15 MS. O'DELL: Objection to form.

16 THE WITNESS: So you're saying Woolen

17 paper because Ms. Bindman is a co-author had

18 something to do with the definition. I

19 don't have any opinion about that. I'm

20 speculating.

21 BY MS. DAVIDSON:

22 Q. Let me ask you another question. If we

23 could look at Table 1 of Woolen 2022. Do you know

24 what the Newcastle Ottawa scale is?

25 A. Only vaguely. This is a metric, a

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1 tool, if you will, that biostatisticians use. In

2 general, my general view is that it sort of talks

3 about the strength of a study. It grades the

4 strength of a study. So as you'll see in the far

5 left hand, there's a column there that has a total

6 score, but that's about as much as I can tell you.

7 Q. Do you recall any other publication

8 that you've reviewed for purposes of this

9 litigation that uses the Newcastle Ottawa score --

10 scale?

11 A. Can I check on one?

12 Q. Sure. Which one are you checking on?

13 A. I'm looking at Lynch.

14 That may not be correct. So I'm not

15 aware of the studies that have used that.

16 Q. Sorry. I didn't mean to interrupt you.

17 Sometimes it's hard to tell when you're done.

18 A. I understand. I'm not aware of other

19 studies that have used the Newcastle scale, but ...

20 Q. Do you recall a meta-analysis called

21 Taher?

22 A. Maher?

23 Q. Taher.

24 A. Taher, yes.

25 Q. Do you recall whether they used the

Page 157

1 Newcastle Ottawa scale?

2 A. That's a memory test. I don't recall.

3 MS. DAVIDSON: Asher, why don't we put

4 that up on the screen. Wait a minute. Let

5 me just look at my numbers. I believe Taher

6 or Taher, I have no idea how to pronounce

7 it, would be Exhibit 14.

8 (Exhibit 14 marked for identification.)

9 BY MS. DAVIDSON:

10 Q. So we're marking as Exhibit 14 --

11 A. Did you get it for me, Margaret?

12 MS. O'DELL: Give me a moment, Jessica,

13 to put the Taher paper in front of him.

14 Obviously, he was examined on the Taher

15 paper during his 2019 deposition and -- at

16 least and possibly the 2021 deposition.

17 MS. DAVIDSON: Asher, can you put the

18 Taher paper up or is this the Taher paper

19 that's up?

20 MR. TRANGLE: This is it.

21 BY MS. DAVIDSON:

22 Q. Can you turn to page 1 just so we have

23 it in the record and then you can go back to that.

24 Taher, "Critical review of the association between

25 perineal use of talcum powder and risk of ovarian

Page 158

1 cancer." It's a meta-analysis. Do you recall this  
2 paper?  
3 A. I do.  
4 Q. Okay. This is Exhibit 14. And if we  
5 could turn to page 90. It says, "The quality of  
6 included studies was assessed using the Newcastle  
7 Ottawa scale."  
8 Does that refresh your recollection?  
9 A. Yes. Yes.  
10 Q. Have you -- I take it since you did not  
11 recall this that you have not compared the Woolen  
12 papers scores for the underlying studies with the  
13 Taher papers scores for the underlying studies; is  
14 that correct?  
15 A. That's correct. I have not compared.  
16 Q. Would it surprise you to know that the  
17 Woolen paper rated every single component  
18 case-control study higher on the Newcastle Ottawa  
19 scale than Taher did?  
20 A. I don't know if there's anything that  
21 surprises me. I mean, there's differences of  
22 opinion about quality which are -- which are not  
23 quantitative but qualitative evaluations of papers.  
24 Q. Do you know why Woolen would have  
25 scored every single study higher than Taher did?

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1 MS. O'DELL: Objection to the form.  
2 THE WITNESS: I don't know. I'd only  
3 be conjecting -- only be guessing.  
4 BY MS. DAVIDSON:  
5 Q. And so do you know -- do you know how  
6 many of the nine case-control studies listed here  
7 were rated higher by Woolen than by Taher?  
8 MS. O'DELL: Object to form.  
9 THE WITNESS: I don't know. I'd have  
10 to put the two studies side by side.  
11 BY MS. DAVIDSON:  
12 Q. Do you recall that Taher said that  
13 these case-control studies provided only a week  
14 evidence?  
15 MS. O'DELL: Object to form.  
16 MS. DAVIDSON: If we could turn to  
17 that, Asher.  
18 BY MS. DAVIDSON:  
19 Q. Can you read the sentence that Asher  
20 has highlighted in yellow from Taher?  
21 A. Sure. "Using GRADEpro for the  
22 assessment, the certainty of the evidence was  
23 classified as very low."  
24 Q. Did Woolen agree with that in her  
25 paper?

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1 MS. O'DELL: Object to the form.  
2 BY MS. DAVIDSON:  
3 Q. In their paper, in the Smith paper?  
4 A. I don't know if she commented on it.  
5 I'm not sure what GRADEpro is.  
6 Q. Got it. So you disagree with Taher  
7 that the certainty of the evidence is very low?  
8 MS. O'DELL: Object to the form.  
9 THE WITNESS: That's what he says. I  
10 don't -- I don't agree or disagree.  
11 BY MS. DAVIDSON:  
12 Q. Okay. If Woolen had used all women  
13 from NHS1 instead of the just patent women, do you  
14 know if it would have affected the results of the  
15 paper?  
16 A. I'm not aware of that data, so I don't  
17 know how it would have affected the results.  
18 Q. What's the typical age when a woman  
19 gets a tubal ligation?  
20 A. Typical age. Well, once she's decided  
21 she doesn't want to have any more children, one. I  
22 would have to -- I don't know the data. From my  
23 experience as a gynecologist, I would say somewhere  
24 between 35 and 40.  
25 Q. And do you know what the typical age is

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1 when women start using talc?  
2 A. My understanding, in the teenage years  
3 once they start having periods.  
4 Q. So if you are only looking at patent  
5 women, you're probably excluding a lot of women who  
6 could have used talc for upwards of a decade or  
7 two; correct?  
8 MS. O'DELL: Objection to form.  
9 THE WITNESS: Yes.  
10 BY MS. DAVIDSON:  
11 Q. And just to be clear, you would be  
12 excluding women who could have used talc for a  
13 decade or two before their tubal ligation; right?  
14 A. Yes. From the time of their teenage  
15 years until whenever they had their tubes tied.  
16 Q. Okay. If we could go back to the Wu  
17 paper.  
18 A. I'm sorry, the Wu paper?  
19 Q. Uh-huh. We were talking about -- on  
20 the Wu paper, if we could go to Table 3.  
21 A. Oh, I'm sorry, one second.  
22 Q. Table 2, sorry. Table 2 of the Wu  
23 paper --  
24 A. Yes.  
25 Q. -- which we're going to mark as



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1 Exhibit 15 because I never marked Wu.  
2 (Exhibit 15 marked for identification.)  
3 For women who used talc greater than 10  
4 but less than 30 times a month, is the  
5 statistical -- is the association identified by Wu  
6 statistically significant?  
7 MS. O'DELL: Objection, form. 20  
8 years, greater than 10, less than 30 times a  
9 month, is that the line? Thank you.  
10 THE WITNESS: I'm sorry. Your question  
11 was was that statistically significant?  
12 BY MS. DAVIDSON:  
13 Q. Correct.  
14 A. And the answer is, no, it overlaps one.  
15 Q. Of all the associations listed here for  
16 different periods of use, how many are  
17 statistically significant?  
18 A. So greater than 20 years and greater  
19 than 30 times per month is statistically  
20 significant.  
21 Q. So only one is statistically  
22 significant; correct?  
23 A. If you go up to --  
24 Q. I just mean in this section. In this  
25 section that looks at frequency and duration.

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1 A. Just frequency and duration, not the  
2 lines above it?  
3 Q. Correct.  
4 A. Yes. Then that's -- one second. Well,  
5 then if you go down, they're statistically  
6 significant increased greater than 200 times per  
7 month -- or per year.  
8 Q. I'm looking at --  
9 MS. O'DELL: Please don't interrupt.  
10 Jessica, it may be difficult to understand  
11 Doctor. If you're not hearing him, let us  
12 know, but he wasn't finished with his  
13 answer. And if you'd kindly let him finish,  
14 I think the record will be clear.  
15 BY MS. DAVIDSON:  
16 Q. Dr. Clarke-Pearson, I'm just talking  
17 about the subsection that says frequency and  
18 duration of talc use, not total times. If you just  
19 look at the subsection entitled "frequency and  
20 duration of talc use," there are one, two, three,  
21 four, five -- there are six point estimates there;  
22 correct?  
23 A. Yes.  
24 Q. And one, two -- and four of those six  
25 involve use of at least two times per week because

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1 four of those six involve use of greater than ten  
2 times per month: The second one, the third one,  
3 the fifth one, and the sixth one. There are --  
4 yeah, Asher, it would be great if you highlight  
5 them. So --  
6 MS. O'DELL: Finished with your  
7 question?  
8 MS. DAVIDSON: Yeah, okay.  
9 MS. O'DELL: Object to form.  
10 BY MS. DAVIDSON:  
11 Q. So if you see the four that are  
12 highlighted, we've highlighted the four point  
13 estimates from Wu that involve use on average of  
14 more than two days per week; correct?  
15 A. Yes.  
16 Q. And of those four, only one is  
17 statistically significant; correct?  
18 A. Yes.  
19 Q. And of those four, the one with the  
20 highest relative risk is the one that was used by  
21 Woolen in her paper; correct?  
22 A. I believe so.  
23 Q. Okay. Thank you. You can take that  
24 down.  
25 Is there a scientific definition for

Page 165

1 frequent use of talc?  
2 MS. O'DELL: Objection to form.  
3 Asher, if you would please put Wu in  
4 the chat, I would appreciate it. Thank you.  
5 THE WITNESS: To answer your question,  
6 Ms. Davidson, I'm not aware of any specific  
7 definition of what was -- I'm sorry, what  
8 was your term, "frequent use"?  
9 BY MS. DAVIDSON:  
10 Q. Yeah. That was a subjective decision  
11 by the authors how to define frequent use; correct?  
12 MS. O'DELL: Objection.  
13 THE WITNESS: Yes, I have no problem  
14 with that at all.  
15 BY MS. DAVIDSON:  
16 Q. I'm just asking you, was that a  
17 subjective decision by the authors?  
18 I'm not asking whether you had a  
19 problem with it.  
20 MS. O'DELL: Objection to form.  
21 THE WITNESS: Yes, that's a decision by  
22 the authors.  
23 BY MS. DAVIDSON:  
24 Q. Thank you. And nowhere in their paper  
25 do they explain how they came to that decision;

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1 correct?

2 A. Not that I'm aware of. A reviewer

3 might have asked them to do that if they felt that

4 was important.

5 Q. Do you know how much the sample size

6 would have increased if the authors had not limited

7 the NHS1 data to patent women?

8 A. No, I don't.

9 Q. Do you know if it would have doubled?

10 A. I don't know.

11 Q. Do you know if it would have tripled?

12 MS. O'DELL: Doctor, just let us know

13 when you get --

14 THE WITNESS: I would have to go back

15 to the original O'Brien paper to answer your

16 question.

17 BY MS. DAVIDSON:

18 Q. What's NCI PDQ?

19 A. What is it?

20 Q. Uh-huh.

21 A. It's a publication that the NCI puts

22 out for information, as my recollection is they

23 have a version for lay people and a version for

24 physicians.

25 Q. Do you know if the NCI -- when is the

Page 167

1 last time you looked at the NCI PDQ?

2 A. Probably whichever.

3 Q. When is the last time you looked at NCI

4 PDQ with respect to ovarian cancer?

5 A. Yesterday.

6 Q. Do you recall whether it addresses

7 Woolen?

8 A. I would have to look and see. They

9 have references. It's not all-inclusive.

10 Q. But you don't recall even though you

11 looked at it yesterday whether it addresses Woolen?

12 A. So it has 14 references, and Woolen is

13 not in there, no. It didn't cite Penocolappy there

14 either, so --

15 Q. I'm confused. Dr. Clarke-Pearson,

16 because this deposition is on Zoom, I've asked you

17 multiple times, I'm asking you again, if you are

18 looking at a document that is not up on the screen,

19 you need to let me know.

20 A. I wasn't aware that was a rule. I've

21 got --

22 Q. I asked you before.

23 A. I'm sorry, I missed it.

24 BY MS. DAVIDSON:

25 Q. Are you looking at a document now --

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1 are you looking at a document now to respond to my

2 question?

3 MS. O'DELL: Just a moment, please.

4 Dr. Clarke-Pearson is free to look at what

5 he would like to to respond to the

6 questions.

7 MS. DAVIDSON: And I'm free to know

8 what he is looking at.

9 MS. O'DELL: And he's telling you,

10 Jessica.

11 MS. DAVIDSON: He didn't -- I didn't --

12 MS. O'DELL: Excuse me, number one,

13 please don't interrupt me. Number two,

14 please be respectful of Dr. Clarke-Pearson

15 who has been most courteous despite the tone

16 of your questions. So let's just proceed.

17 If you've got a question about -- he's here

18 and available to answer them.

19 MS. DAVIDSON: Thank you, Leigh, for

20 your colloquy.

21 MS. O'DELL: You're welcome.

22 BY MS. DAVIDSON:

23 Q. Dr. Clarke-Pearson, I was asking you

24 whether the NCI PDQ references Woolen, and it

25 sounded like you were looking at something. What

Page 169

1 were you looking at?

2 A. I'll hold it up in front of the screen

3 for you. It's the NCI PDQ.

4 Q. Okay. And is that the version you

5 looked at yesterday?

6 A. Yes.

7 Q. Okay. Can we mark as Tab 10 the NCI --

8 I'm sorry, as Exhibit 16 the NCI PDQ on ovarian

9 cancer?

10 (Exhibit 16 marked for identification.)

11 MS. DAVIDSON: Can you go to the top,

12 please, Asher.

13 BY MS. DAVIDSON:

14 Q. Dr. Clarke-Pearson, is this the same

15 NCI PDQ document that you looked at yesterday?

16 A. I believe it is. At the top of mine,

17 it says October 4, 2023.

18 Q. Okay. If we could move down to where

19 it references, ours is October 16, 2023. So is

20 that different from the one you looked at?

21 MS. O'DELL: Is that on page 27, Asher,

22 just so we can follow along?

23 MS. DAVIDSON: I can't hear you, Leigh.

24 MS. O'DELL: Is that on page 22 -- or

25 27 so we can follow along with where you

Page 170

1 are.

2 MS. DAVIDSON: I'm trying to determine

3 if Dr. Clarke-Pearson is looking at the same

4 document that's on the screen. Do we know

5 the answer to that?

6 MS. O'DELL: He can answer. I believe

7 that to be the case. But he's got it in

8 front of him.

9 THE WITNESS: Everything I see so far

10 looks like what I have in front of me.

11 BY MS. DAVIDSON:

12 Q. Okay. If we could go to the sentence

13 that begins the meta-analysis.

14 Asher, are you going to use your new

15 highlighting skills?

16 "A meta-analysis of ten case-control

17 studies," can you highlight that, Asher? It

18 disappeared. I don't know what happened.

19 Technical glitch.

20 MR. TRANGLE: I can't highlight it.

21 It's like a printed document.

22 BY MS. DAVIDSON:

23 Q. Just point to where the sentence is.

24 You see where it says, "A meta-analysis

25 of ten case-control studies in a highly selected

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1 subset analysis of one prospective cohort study

2 found in association among women who use perineal

3 talc at least twice a week." And then it's

4 followed by footnote 10?

5 Do you see that on the screen, Doctor?

6 I think it would be easier if you looked on the

7 screen.

8 A. Okay. I'll look at the screen. So a

9 meta-analysis 16 study --

10 Q. No. The third sentence of that

11 paragraph.

12 A. The -- show me which sentence.

13 MS. DAVIDSON: Right there, Asher.

14 Asher, there is a way to highlight something

15 like this. Please on our next break ask

16 someone.

17 THE WITNESS: A meta-analysis of ten

18 case-control studies, is that where you are?

19 BY MS. DAVIDSON:

20 Q. Uh-huh.

21 A. I see the arrow now. "And a highly

22 selected subset analysis of one prospective cohort

23 study found an association, operation 1.4 to 7

24 statistically significant by a woman who used

25 perineal talc at least twice a week."

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1 Q. Followed by footnote 10?

2 A. 10, uh-huh.

3 Q. What does footnote 10 refer to?

4 A. You'll have to show me.

5 Q. Oh, okay.

6 A. I would presume it's Woolen, but I'm

7 not sure.

8 Q. That is correct. Does this change your

9 testimony as to whether the NCI PDQ addresses

10 Woolen?

11 A. Yes, it changes my testimony. This PDQ

12 version does include Woolen.

13 Q. And the one you looked at yesterday

14 does not?

15 A. Apparently not.

16 Q. Can you look at footnote 10 of the one

17 you looked at yesterday and tell me if it addresses

18 Woolen?

19 A. I'm sorry. Ask the question again.

20 Q. Can you look at the hard copy of the

21 one you looked at yesterday and see if there was a

22 footnote 10 addressing Woolen?

23 A. Actually, it is here. I'm sorry.

24 Q. Okay. So we are looking at the same

25 one and there was just a mistake?

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1 A. Yes. My oversight.

2 Q. Okay. Let's go back to the top where

3 we were talking about Woolen.

4 "The authors refer to a highly

5 selective subset analysis of one prospective cohort

6 study."

7 What are they referring to there?

8 A. Once again, they're talking about

9 Woolen.

10 Q. When the authors say "a highly selected

11 subset of one prospective cohort study," what does

12 that refer to?

13 A. That's the interpretation of whoever

14 wrote this PDQ.

15 Q. It says, "A meta-analysis of ten

16 case-control studies and a highly selected subset

17 analysis of one prospective cohort study."

18 What does that phrase "a highly

19 selected subset analysis of one prospective cohort

20 study" refer to?

21 A. Refers to Woolen, just like I said.

22 Q. Woolen is the highly selected subset

23 analysis of one prospective cohort study?

24 MS. O'DELL: Objection to form.

25 THE WITNESS: Yes, because the

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1 meta-analysis, the ten case-control studies  
2 wouldn't include Woolen because Woolen  
3 doesn't include only case-control study, it  
4 includes the cohort study as well.  
5 BY MS. DAVIDSON:  
6 Q. Which prospective cohort study is this  
7 phrase referring to?  
8 A. Prospective cohort study would be the  
9 data from O'Brien that's included in the Woolen  
10 study.  
11 Q. Why does NCI state that it's a highly  
12 selected subset analysis?  
13 A. I'm not sure why they use those terms.  
14 It's a subset analysis that's been performed. It  
15 went through a peer-reviewed process. It was  
16 published in a reputable journal.  
17 Q. The authors go on to state, "The subset  
18 analysis of the prospective study was inconsistent  
19 with the main findings of the original report."  
20 Do you see that sentence?  
21 A. Yes.  
22 Q. What does that refer to?  
23 A. It was referring back to whatever  
24 number 11 is, which is the O'Brien study --  
25 Q. Can we go back up, Asher.

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1 A. -- in 2020.  
2 Q. So what do the authors mean by --  
3 MS. DAVIDSON: Asher, something weird  
4 has happened. Can you go back to the paragraph we  
5 were on?  
6 BY MS. DAVIDSON:  
7 Q. What did the authors mean when they  
8 say, "the subset analysis of the prospective study  
9 was inconsistent with the main findings of the  
10 original report"?  
11 A. The data that's in the -- in Woolen is  
12 different than the data that was in the original  
13 O'Brien. So 10 has different data than 11, those  
14 references.  
15 Q. And what is inconsistent?  
16 MS. O'DELL: Objection to form.  
17 THE WITNESS: I'm sorry, what did what  
18 consist of?  
19 BY MS. DAVIDSON:  
20 Q. What do the authors mean? Can you tell  
21 me what's inconsistent? How is the subset analysis  
22 inconsistent with the main findings of O'Brien?  
23 A. Well, that's the authors'  
24 interpretation. I wouldn't say it's inconsistent.  
25 They are two different data sets. And O'Brien

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1 submitted to Woolen data from the original nurse's  
2 health study that specifically addressed frequency  
3 of use in patients with patent tubes. So it's not  
4 inconsistent, it's just different.  
5 Q. The author says it's inconsistent with  
6 the main findings of the original report. What  
7 were the main findings of O'Brien 2020?  
8 MS. O'DELL: Objection.  
9 THE WITNESS: I'd have to look at  
10 O'Brien 2020, but I think there was an  
11 increased risk of talcum powder -- increased  
12 risk of ovarian cancer in patients that used  
13 talcum powder that had patent tubes.  
14 BY MS. DAVIDSON:  
15 Q. Was that the main finding of the  
16 report?  
17 MS. O'DELL: Objection to form.  
18 THE WITNESS: That's my recollection.  
19 BY MS. DAVIDSON:  
20 Q. "Because of the structure of this  
21 analysis, the results should be interpreted with  
22 care." What do the authors mean by that?  
23 A. I think all interpretations should be  
24 undertaken with care. They're just advising take a  
25 look at it.

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1 Q. Based on this discussion, has Woolen  
2 changed the NCI PDQ's views about the potential  
3 relationship between talc and ovarian cancer?  
4 A. Apparently, it hasn't changed NIH's NCI  
5 view. Clearly, it's an incomplete analysis by NIH.  
6 They have many references that are missing. They  
7 didn't do their own meta-analysis of their own  
8 evaluation. They're citing some papers in a  
9 meta-analysis.  
10 Q. Have you ever reached out to NCI or NIH  
11 to share your views about talc and ovarian cancer?  
12 A. No, I have not.  
13 Q. Have you ever reached out to O'Brien or  
14 Wentzensen to share your views about talc or  
15 ovarian cancer?  
16 A. No.  
17 Q. Do you have any reason to doubt the  
18 ability of O'Brien and Wentzensen as scientists or  
19 epidemiologists?  
20 MS. O'DELL: Object to the form.  
21 THE WITNESS: I think there's a number  
22 of comments that have been published in a  
23 letter to the editor outlining a number of  
24 criticisms about that publication.  
25 BY MS. DAVIDSON:

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1 Q. Have any of the letters that have been  
2 published criticizing O'Brien and Wentzensen been  
3 written by someone who is not a plaintiffs' expert  
4 in the litigation?

5 MS. O'DELL: Object to the form.

6 THE WITNESS: I know that Dr. Cramer  
7 who's a plaintiffs' expert has written a  
8 fairly lengthy letter to the editor that  
9 outlines a number of issues that he would  
10 contend are incorrect and should be changed  
11 and altered in the interpretation. I think  
12 there are other authors that have authored  
13 other papers. I'm not aware of their names  
14 and whether they're involved with  
15 plaintiffs' legal actions or not.

16 BY MS. DAVIDSON:

17 Q. Would it surprise you to know that  
18 nobody has written a letter to the editor with  
19 respect to O'Brien and Wentzensen who is not a  
20 plaintiffs' expert in this litigation?

21 MS. O'DELL: Objection. Asked and  
22 answered.

23 THE WITNESS: I would just have to see  
24 all the letters.

25 BY MS. DAVIDSON:

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1 Q. I see. Are you aware sitting here  
2 today of anybody who's not a plaintiffs' expert in  
3 the litigation who has written a letter with  
4 respect to O'Brien or Wentzensen's publications?

5 MS. O'DELL: Object to form. He stated  
6 he doesn't know who's written the letter or  
7 whether they're in litigation or not.

8 MS. DAVIDSON: Leigh, you have just  
9 coached the witness. I appreciate it. I'm  
10 sure the witness appreciates it. Please  
11 stop doing it.

12 BY MS. DAVIDSON:

13 Q. Dr. Clarke-Pearson, sitting here today,  
14 are you aware of anyone who is not an expert for  
15 plaintiffs in talc litigation who has written any  
16 letters involving any publications about talc by  
17 O'Brien and Wentzensen?

18 MS. O'DELL: Objection to form.

19 THE WITNESS: As I said before, I would  
20 have to go back and look at what's been  
21 published in letter to the editor before I  
22 could answer your question.

23 BY MS. DAVIDSON:

24 Q. Do you have any views about Dr. O'Brien  
25 or Dr. Wentzensen's abilities as a scientist?

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1 A. As scientist, I think none of us are  
2 perfect.

3 Q. Hmm?

4 A. I said none of us are perfect. And I'm  
5 sure they're not either.

6 Q. Do you know anything about either  
7 Dr. O'Brien or Dr. Wentzensen's professional  
8 reputation?

9 A. I don't. I think I said already I  
10 didn't know anything about them.

11 Q. Are you aware that a federal court  
12 excluded Dr. Smith-Bindman's meta-analysis in a  
13 talc case -- that a state court excluded  
14 Dr. Smith-Bindman's meta-analysis in a talc case?

15 MS. O'DELL: Objection.

16 THE WITNESS: I was not aware of that,  
17 no.

18 BY MS. DAVIDSON:

19 Q. Since you're not aware of that, I take  
20 it you didn't review that opinion?

21 MS. O'DELL: Object to the form.

22 THE WITNESS: I didn't know there was  
23 an opinion.

24 BY MS. DAVIDSON:

25 Q. Are you familiar with Dr. McTiernan?

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1 A. Yes.

2 Q. Who's she?

3 A. She is an epidemiologist.

4 Q. Does your view that no scientist is  
5 perfect extend to Dr. Saed and Dr. Smith-Bindman as  
6 well?

7 MS. O'DELL: I'm sorry, I didn't hear  
8 that question. Would you please repeat it?

9 MS. DAVIDSON: Court reporter.  
10 (The reporter read back the last question.)

11 THE WITNESS: Yes, I just said that all  
12 of us -- none of us are perfect.

13 BY MS. DAVIDSON:

14 Q. Can you point to any flaws in  
15 Dr. Saed's paper, Harper 2023?

16 A. Can I point to any what?

17 Q. Flaws.

18 MS. O'DELL: Object to form.

19 THE WITNESS: Flaws?

20 BY MS. DAVIDSON:

21 Q. Uh-huh.

22 A. Not at this point in time, no.

23 Q. Can you point to any flaws in Woolen?

24 MS. O'DELL: Object to form.

25 THE WITNESS: No. There are



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1 limitations that are cited by the authors in  
2 their papers. I don't call those flaws.  
3 BY MS. DAVIDSON:  
4 Q. You included a forest plot in your  
5 amended expert report; is that correct?  
6 A. I did.  
7 Q. How did you get that forest plot?  
8 A. It was supplied by Dr. McTiernan. It  
9 was an updated forest plot similar to, but updated  
10 from the one I've used in a previous report.  
11 Q. Who provided it to you?  
12 A. My attorney.  
13 Q. Did you independently examine the  
14 forest plot for accuracy before putting it in your  
15 report?  
16 A. I reviewed it. I didn't go case by --  
17 paper by paper to relook at the numbers.  
18 Q. Did you check if it was missing any  
19 studies?  
20 A. I'm sorry?  
21 Q. Did you check if it was missing any  
22 studies?  
23 A. I think at the date and time when I  
24 received it, which I don't recall exactly, I  
25 thought it was up to date.

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1 Q. Are you aware that a federal court  
2 excluded Dr. McTiernan's opinions as unreliable in  
3 the Zantac litigation?  
4 MS. O'DELL: Object to form.  
5 THE WITNESS: No, I wasn't.  
6 BY MS. DAVIDSON:  
7 Q. Are you aware that Dr. McTiernan has  
8 testified that she followed the same scientific  
9 methodology in Zantac as she did in talc?  
10 MS. O'DELL: Object to the form.  
11 THE WITNESS: I'm not aware of her  
12 testimony.  
13 BY MS. DAVIDSON:  
14 Q. Are you aware of any independent  
15 scientists not retained by plaintiffs in this  
16 litigation who has concluded that talc use causes  
17 ovarian cancer?  
18 A. I'm sorry, who?  
19 Q. Are you aware of any independent  
20 scientists not retained by plaintiffs in this  
21 litigation who has concluded that talc use causes  
22 ovarian cancer?  
23 A. Well, we can look at the forest plot  
24 you're looking at right here and see a number of  
25 the case-control studies that are all -- that are

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1 statistically significant. Those, as I believe,  
2 are all independent scientists that have published  
3 those case-control studies. And then we can go on  
4 down to the meta-analysis, all of which are  
5 statistically significant. I'm not aware of any of  
6 them being plaintiffs, defendants either.  
7 Q. Did any of those authors state that  
8 their studies -- did any of those authors state in  
9 their papers that they've concluded that talc use  
10 causes ovarian cancer?  
11 A. I think they showed a statistical  
12 significant increased risk of developing ovarian  
13 cancer because of the use of talcum powder.  
14 Q. That was not my question.  
15 MS. O'DELL: You cut him off, Jessica.  
16 If you could just let him finish, please.  
17 BY MS. DAVIDSON:  
18 Q. Dr. Clarke-Pearson, can you please  
19 answer my question. Are you aware of any  
20 independent scientist not retained by plaintiffs in  
21 this litigation who has stated that talc use can  
22 cause ovarian cancer?  
23 MS. O'DELL: Object to the form.  
24 THE WITNESS: So the word you're using  
25 is cause, is that where we're pivoting?

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1 BY MS. DAVIDSON:  
2 Q. Correct.  
3 A. I'm not sure -- I would have to reread  
4 these papers to know whether they were somehow  
5 screening those papers to see whether they use the  
6 word "cause." Clearly they come up with a finding  
7 that is statistically associated with the  
8 development of ovarian cancer which to me means  
9 cause.  
10 Q. So is it your testimony that anytime  
11 there's an association, that means cause?  
12 MS. O'DELL: Object to the form.  
13 THE WITNESS: No.  
14 BY MS. DAVIDSON:  
15 Q. I think that's what you just said. You  
16 said statistically association which to me means  
17 cause; correct?  
18 A. I think a lot of people would interpret  
19 it as cause.  
20 Q. Again, sitting here today, you can't  
21 identify a single independent scientist not  
22 retained by plaintiffs in this litigation who has  
23 stated that talc use causes ovarian cancer;  
24 correct?  
25 MS. O'DELL: Object to the form.

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1 THE WITNESS: Not that I can recall to  
2 answer your question.  
3 BY MS. DAVIDSON:  
4 Q. Are you aware of any published paper in  
5 the scientific literature by an independent  
6 scientist who is not a paid expert in this  
7 litigation that concludes that talc use causes  
8 ovarian cancer?  
9 MS. O'DELL: Object to form. Asked and  
10 answered. It also retreads ground that was  
11 previously covered in prior depositions.  
12 And so if you have a question about a  
13 specific paper that has been included in  
14 Dr. Clarke-Pearson's report since July of  
15 2021, you know, then I would ask you to  
16 direct your questions to those publications,  
17 not a re-review of everything he has looked  
18 at over the course of this six-year  
19 litigation.  
20 MS. DAVIDSON: Leigh, this is an  
21 ongoing effort by you to obstruct this  
22 deposition.  
23 MS. O'DELL: It is not. It is to state  
24 my objection on the record.  
25 BY MS. DAVIDSON:

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1 Q. I will keep my question.  
2 Dr. Clarke-Pearson, sitting here today, are you  
3 aware of any published literature -- any published  
4 paper in this scientific literature by an  
5 independent scientist who is not a paid expert in  
6 this litigation that reaches the conclusion that  
7 talc use causes ovarian cancer?  
8 A. Not aware of that, no.  
9 Q. Are you aware of a single scientific  
10 body in the United States that has concluded that  
11 talc use causes ovarian cancer?  
12 A. So a number of scientific bodies have  
13 identified asbestos as causing ovarian cancer. We  
14 know that asbestos is in ovarian cancer in  
15 Johnson's Baby Powder. So in many ways I view baby  
16 powder with asbestos as a carcinogen that causes  
17 ovarian cancer.  
18 Q. Do you have --  
19 A. So there are a number of scientific  
20 organizations that have identified asbestos as  
21 causing ovarian cancer, including IARC, EPA, and  
22 others.  
23 Q. Are you aware of a single scientific  
24 body in the United States that has stated that  
25 cosmetic talc use causes ovarian cancer?

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1 MS. O'DELL: Object to the form. Asked  
2 and answered.  
3 THE WITNESS: I will go to IARC, for  
4 one, that says that the source of talc  
5 outside of mining and industrial exposure is  
6 most likely secondary to cosmetic exposure.  
7 BY MS. DAVIDSON:  
8 Q. Again, I'm going to ask the question,  
9 are you aware of a single scientific body in the  
10 United States that has stated that cosmetic talc  
11 use causes ovarian cancer?  
12 MS. O'DELL: Objection, form. Asked  
13 and answered.  
14 THE WITNESS: Cosmetic talc Johnson's  
15 Baby Powder has asbestos in it. Asbestos  
16 causes ovarian cancer. Many organizations  
17 at the highest level of our government and  
18 scientific community have identified  
19 asbestos as causing ovarian cancer.  
20 BY MS. DAVIDSON:  
21 Q. Can you identify a single scientific  
22 body in the United States that has stated cosmetic  
23 talc causes ovarian cancer?  
24 MS. O'DELL: Objection to form. The  
25 question was just asked. Dr. Clarke-Pearson

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1 gave his answer. Dr. Clarke-Pearson, you're  
2 welcome to respond again, but if you -- if  
3 it's the same answer you've previously  
4 given, you can so say that.  
5 MS. DAVIDSON: Leigh, you're continuing  
6 your pattern of obstructing this deposition  
7 and coaching the witness.  
8 BY MS. DAVIDSON:  
9 Q. Dr. Clarke-Pearson, with all due  
10 respect, you are not answering the question I  
11 asked.  
12 My question is whether there is any  
13 United States scientific body -- any scientific  
14 body in the United States that has stated that  
15 cosmetic talc use causes ovarian cancer?  
16 MS. O'DELL: Objection to form. Asked  
17 and answered.  
18 Please do not badger Dr. Clarke-Pearson  
19 or be disrespectful.  
20 THE WITNESS: If you're focusing only  
21 on the term "talc," then I'm not aware of  
22 that. But talc has asbestos in it.  
23 BY MS. DAVIDSON:  
24 Q. Dr. Clarke-Pearson, do you have an  
25 opinion as to what percentage of Johnson's Baby

<p style="text-align: right;">Page 190</p> <p>1 Powder that's been sold in this country contained</p> <p>2 asbestos?</p> <p>3 A. Relying on Dr. Longo's analysis, it's</p> <p>4 more likely than not and in some cases, for example</p> <p>5 Chinese talc, nearly all of it has at least fibrous</p> <p>6 talc, if not other asbestos --</p> <p>7 Q. So it's your opinion --</p> <p>8 A. -- fibers.</p> <p>9 Q. Do you have an opinion as to what</p> <p>10 percentage of Johnson's Baby Powder sold in the</p> <p>11 United States over the last 50 years contains</p> <p>12 asbestos?</p> <p>13 MS. O'DELL: Objection. Asked and</p> <p>14 answered. You may respond.</p> <p>15 THE WITNESS: Dr. Longo's data goes</p> <p>16 back and the sources of talcum powder for</p> <p>17 Johnson's Baby Powder from three different</p> <p>18 sources over three different time periods</p> <p>19 that have different levels of talcum powder</p> <p>20 as I read Dr. Longo's reports, all of which</p> <p>21 are in excess of 50 percent.</p> <p>22 BY MS. DAVIDSON:</p> <p>23 Q. Are all of your opinions about whether</p> <p>24 or not Johnson's Baby Powder contains asbestos</p> <p>25 based on Dr. Longo's report?</p>	<p style="text-align: right;">Page 192</p> <p>1 of asbestos to which a woman is allegedly exposed</p> <p>2 from talcum powder can cause ovarian cancer?</p> <p>3 MS. O'DELL: Objection to form.</p> <p>4 Incomplete hypothetical.</p> <p>5 THE WITNESS: I'm unaware of any</p> <p>6 threshold, if you will, or minimum amount of</p> <p>7 asbestos that would or would not cause</p> <p>8 ovarian cancer.</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. Is it your opinion that talcum powder</p> <p>11 that does not contain asbestos causes ovarian</p> <p>12 cancer?</p> <p>13 A. I'm not aware of any talcum powder</p> <p>14 based on the data that I've seen that doesn't</p> <p>15 contain asbestos.</p> <p>16 Q. If a woman were to use cosmetic talc</p> <p>17 that doesn't contain asbestos, would she be at an</p> <p>18 increased of ovarian cancer?</p> <p>19 A. I would think that the evidence shows</p> <p>20 that if you make the hypothetical there's no</p> <p>21 asbestos in it, then the talcum powder and all the</p> <p>22 studies that have been done and, hypothetically,</p> <p>23 that those patients were exposed, those women were</p> <p>24 exposed to talcum powder that didn't have asbestos,</p> <p>25 they still had a higher risk of ovarian cancer</p>
<p style="text-align: right;">Page 191</p> <p>1 A. No. The FDA found asbestos and</p> <p>2 Johnson's Baby Powder brought it off the shelf.</p> <p>3 Q. How many lots of Johnson's Baby Powder</p> <p>4 did the FDA find asbestos in?</p> <p>5 A. I think Johnson &amp; Johnson took one lot</p> <p>6 of 3,000 bottles off the shelf based on the</p> <p>7 analysis.</p> <p>8 Q. FDA found asbestos in one lot of</p> <p>9 Johnson's Baby Powder?</p> <p>10 A. Yes.</p> <p>11 Q. And was that a trace level or a</p> <p>12 subtrace level?</p> <p>13 MS. O'DELL: Object to the form.</p> <p>14 THE WITNESS: I don't know how to</p> <p>15 define a trace level.</p> <p>16 BY MS. DAVIDSON:</p> <p>17 Q. And that's because you're not an expert</p> <p>18 on asbestos; right?</p> <p>19 MS. O'DELL: Objection.</p> <p>20 THE WITNESS: I'm not sure what you</p> <p>21 mean by -- I know what asbestos does to</p> <p>22 women that have ovaries.</p> <p>23 BY MS. DAVIDSON:</p> <p>24 Q. Dr. Clarke-Pearson, can you point me to</p> <p>25 any epidemiological studies showing that the level</p>	<p style="text-align: right;">Page 193</p> <p>1 caused by talcum powder.</p> <p>2 Q. Do you believe that the mechanism by</p> <p>3 which talcum powder can cause ovarian cancer is the</p> <p>4 same for talcum powder that contains asbestos and</p> <p>5 talcum powder that doesn't contain asbestos?</p> <p>6 MS. O'DELL: Objection to the question.</p> <p>7 This is retreading ground that was covered</p> <p>8 in -- I believe it was January or</p> <p>9 February 2019 almost completely, and</p> <p>10 Dr. Clarke-Pearson's already answered the</p> <p>11 questions.</p> <p>12 MS. DAVIDSON: Court reporter, can you</p> <p>13 please repeat the question.</p> <p>14 Doctor, because Ms. O'Dell interrupts</p> <p>15 every questions, it takes twice as long to</p> <p>16 ask every question.</p> <p>17 Court reporter, can you please --</p> <p>18 MS. O'DELL: That's incorrect. But you</p> <p>19 know that. I'm just -- what you stated is</p> <p>20 an error on the record. Please ask your</p> <p>21 question.</p> <p>22 (The reporter read back the last question.)</p> <p>23 THE WITNESS: Yes.</p> <p>24 MS. DAVIDSON: Okay. Let's go off the</p> <p>25 record.</p>

<p style="text-align: right;">Page 194</p> <p>1 (Recess taken from 1:23 p.m. until 1:25 p.m.)</p> <p>2 MS. DAVIDSON: So, number one, the</p> <p>3 Court's order is very clear that case</p> <p>4 specific experts will be deposed for -- I'm</p> <p>5 going to read the order exactly.</p> <p>6 MS. O'DELL: Dr. Clarke-Pearson has</p> <p>7 already been deposed for 14 hours --</p> <p>8 MS. DAVIDSON: Excuse me, you're like</p> <p>9 literally interrupting me. You're literally</p> <p>10 interrupting me.</p> <p>11 MS. O'DELL: -- on his case specific</p> <p>12 opinions and that occurred in August of --</p> <p>13 MS. DAVIDSON: You're interrupting me,</p> <p>14 Leigh. You literally interrupted me</p> <p>15 mid-sentence.</p> <p>16 MS. O'DELL: Well --</p> <p>17 MS. DAVIDSON: According to order, as I</p> <p>18 was saying before I was interrupted,</p> <p>19 depositions of experts who address case</p> <p>20 specific issues for individual plaintiffs in</p> <p>21 addition to providing new or supplemental</p> <p>22 reports on general causation shall be</p> <p>23 limited to a total of one day, seven hours.</p> <p>24 If the expert issues case specific reports</p> <p>25 in three or more cases, in which case the</p>	<p style="text-align: right;">Page 196</p> <p>1 3 hours and 39 minutes, and there's</p> <p>2 21 minutes left.</p> <p>3 MS. DAVIDSON: I understand that you</p> <p>4 have decided not to fulfill the Court's</p> <p>5 order, and that's your prerogative. We will</p> <p>6 take it up with the Court and make very</p> <p>7 clear to the Court that we read the ruling</p> <p>8 into the record and you chose not to follow</p> <p>9 it.</p> <p>10 Leigh, I would also like to raise with</p> <p>11 you before we get into this tomorrow that</p> <p>12 Dr. Moorman, we were never served with her</p> <p>13 2021 report, and so we are entitled to eight</p> <p>14 hours, four hours on her 2021 report and</p> <p>15 four hours on her 2023 report.</p> <p>16 MS. O'DELL: I'm going to let Michelle</p> <p>17 respond to that.</p> <p>18 MS. DAVIDSON: Okay. I'm going to give</p> <p>19 you the heads up now.</p> <p>20 MS. O'DELL: We should be off the</p> <p>21 record, though, for that.</p> <p>22 MS. DAVIDSON: We can go off the</p> <p>23 record.</p> <p>24 MS. O'DELL: Before we do that, I would</p> <p>25 just ask since we are going to stop at four</p>
<p style="text-align: right;">Page 195</p> <p>1 deposition is limited to two days, 14 hours</p> <p>2 of testimony time.</p> <p>3 This order was issued several months</p> <p>4 ago. If you guys choose to be in violation</p> <p>5 of the order, we will take it up with the</p> <p>6 Court. I would also like to point out,</p> <p>7 Leigh --</p> <p>8 MS. O'DELL: Our position is, Jessica,</p> <p>9 just to be clear, we are not in violation of</p> <p>10 the order because Dr. Clarke-Pearson has</p> <p>11 already sat for two days, seven hours each,</p> <p>12 for his case specific opinions. The purpose</p> <p>13 of the deposition today was to examine him</p> <p>14 on any new references or any new -- in his</p> <p>15 report that was served November 2023 or any</p> <p>16 new opinions that he might have. He's been</p> <p>17 available today. That deposition is limited</p> <p>18 to four hours. That's how we understand the</p> <p>19 order and that's how we're proceeding.</p> <p>20 That's how we proceeded previously with</p> <p>21 the depositions of these experts, including</p> <p>22 last week. So I just -- that's our</p> <p>23 position. We can agree to disagree. But</p> <p>24 today just so you're clear and you</p> <p>25 understand, we've been on the record for</p>	<p style="text-align: right;">Page 197</p> <p>1 hours today, can we proceed with the</p> <p>2 remaining 21 minutes --</p> <p>3 MS. DAVIDSON: I need a break.</p> <p>4 MS. O'DELL: -- and then conclude. You</p> <p>5 need a break? You're saying you need a</p> <p>6 break.</p> <p>7 MS. DAVIDSON: I need a break.</p> <p>8 MS. O'DELL: If you cannot continue for</p> <p>9 21 minutes --</p> <p>10 MS. DAVIDSON: I need a break. I can</p> <p>11 cut it short.</p> <p>12 MS. O'DELL: Then we will be available</p> <p>13 in 15 minutes to -- I certainly want you to</p> <p>14 have a break. And then we'll come back in</p> <p>15 15 minutes at 1:30 and you can finish.</p> <p>16 MS. DAVIDSON: It's 1:28. It's 1:28.</p> <p>17 1:30 would be in two minutes.</p> <p>18 MS. O'DELL: I'm sorry. 1:45 is what I</p> <p>19 meant to say.</p> <p>20 (Recess taken from 1:28 p.m. until 1:52 p.m.)</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. Dr. Clarke-Pearson, are you familiar</p> <p>23 with talc pleurodesis?</p> <p>24 A. Yes.</p> <p>25 Q. You testified earlier that you believed</p>

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1 that cosmetic talc is virtually all contaminated  
2 with asbestos; correct?  
3 A. Yes.  
4 Q. Is that your opinion about  
5 pharmaceutical grade talc as well?  
6 A. I don't have an opinion about  
7 pharmaceutical grade talc.  
8 Q. Have you reviewed the literature on  
9 talc pleurodesis?  
10 A. No. I have not reviewed the  
11 literature. I'm familiar with the technique having  
12 used it on patients that I've taken care of.  
13 Q. When you used that procedure on  
14 patients that you've taken care of, do you believe  
15 that you injected asbestos into their lungs?  
16 MS. O'DELL: Object to the form.  
17 THE WITNESS: I'm not sure what's in  
18 the pharmaceutical grade of talc.  
19 BY MS. DAVIDSON:  
20 Q. Has IARC addressed whether pleurodesis  
21 can cause cancer?  
22 MS. O'DELL: Objection. Form.  
23 THE WITNESS: I'm not familiar that  
24 they have. The IARC documents are quite  
25 extensive, so I may have missed something.

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1 BY MS. DAVIDSON:  
2 Q. Do you know whether pharmaceutical  
3 grade talc and cosmetic talc can come from the same  
4 mines?  
5 A. I don't know.  
6 Q. Are you aware that the FDA tested talc  
7 in 2010, 2019, 2021, and 2022, and on all of those  
8 occasions found no asbestos?  
9 MS. O'DELL: Object to the form.  
10 THE WITNESS: I was not aware of that,  
11 no.  
12 BY MS. DAVIDSON:  
13 Q. Do you think the FDA was wrong in 2010  
14 when it found no asbestos in cosmetic talc?  
15 MS. O'DELL: Object to the form.  
16 THE WITNESS: I have no opinion about  
17 that. I don't know how they -- to what  
18 extent they tested it, what techniques they  
19 used. I don't know how many samples they  
20 tested. So I don't have an opinion about  
21 that.  
22 BY MS. DAVIDSON:  
23 Q. Do you have an opinion -- do you  
24 believe the FDA was wrong in 2019 when it tested  
25 cosmetic talc and found no asbestos?

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1 MS. DAVIDSON: Objection. Form.  
2 THE WITNESS: I can only believe what  
3 the FDA reported.  
4 BY MS. DAVIDSON:  
5 Q. Do you believe the FDA was wrong in  
6 2021 when it tested cosmetic talc and found no  
7 asbestos?  
8 A. I wasn't aware that there was testing  
9 at that point in time.  
10 Q. Do you believe the FDA was wrong in  
11 2022 when it tested cosmetic talc and found no  
12 asbestos?  
13 MS. O'DELL: Objection. Form.  
14 THE WITNESS: Once again, I wasn't  
15 aware that they tested in 2022.  
16 BY MS. DAVIDSON:  
17 Q. Are you surprised that the lawyers  
18 didn't provide you with those testing results?  
19 MS. O'DELL: Objection. Form.  
20 THE WITNESS: I didn't ask for that.  
21 No.  
22 BY MS. DAVIDSON:  
23 Q. Would it have been relevant to your  
24 opinion to know that the FDA tested cosmetic talc  
25 four times and didn't find asbestos?

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1 MS. O'DELL: Objection to form.  
2 THE WITNESS: No.  
3 BY MS. DAVIDSON:  
4 Q. That wouldn't be relevant to your  
5 opinions?  
6 A. No.  
7 Q. Do Duke and UNC perform pleurodesis?  
8 A. Have I asked that to be done on my  
9 patients? Yes.  
10 Q. Have you ever suggested to Duke or to  
11 UNC that they stopped performing pleurodesis  
12 because of the risk of injecting asbestos into  
13 patients?  
14 A. No. Most of my patients that needed  
15 pleurodesis were dying of ovarian cancer. I was  
16 trying to give them some relief from their  
17 respiratory distress.  
18 Q. So it wouldn't have mattered to you if  
19 that procedure put asbestos into someone's --  
20 MS. O'DELL: Objection to form.  
21 BY MS. DAVIDSON:  
22 Q. -- lungs?  
23 A. I knew that their latency -- a latency  
24 period for talc and -- could cause cancer was  
25 years, and these women had months and days to live.



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1 So, no, I didn't. It wasn't really a  
2 consideration.  
3 Q. Is it your opinion that pleurodesis  
4 would be a proper procedure even if it injected  
5 asbestos into people's lungs?  
6 MS. O'DELL: Objection to form.  
7 THE WITNESS: Depends upon the  
8 circumstances.  
9 BY MS. DAVIDSON:  
10 Q. Have you ever told UNC or Duke that  
11 you're concerned that the pleurodesis procedure is  
12 injecting asbestos into people's lungs?  
13 MS. O'DELL: Object to form.  
14 THE WITNESS: I don't know that it's  
15 injecting talc -- that the pleurodesis is  
16 injecting asbestos into the lungs.  
17 BY MS. DAVIDSON:  
18 Q. When --  
19 A. I don't have any data on that topic.  
20 Q. When did you come to the opinion that  
21 most talc -- cosmetic talc contains asbestos?  
22 MS. O'DELL: Objection. Form.  
23 THE WITNESS: When I started seeing  
24 Dr. Longo's reports in particular.  
25 BY MS. DAVIDSON:

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1 Q. As a scientist, you'd agree that your  
2 job is to evaluate all the relevant evidence;  
3 right?  
4 A. Yes. That's part of the comprehensive  
5 differential diagnosis. Go ahead.  
6 Q. Are you aware that defendants have an  
7 expert named Matt Sanchez from RJ Lee who has  
8 rebutted Dr. Longo's reports?  
9 MS. O'DELL: Objection to form.  
10 THE WITNESS: Not aware -- I have not  
11 seen or was not aware of another expert.  
12 BY MS. DAVIDSON:  
13 Q. Have you asked plaintiffs' lawyers to  
14 give you all the relevant evidence about asbestos  
15 testing?  
16 MS. O'DELL: Objection to form.  
17 THE WITNESS: I have not asked for  
18 that.  
19 BY MS. DAVIDSON:  
20 Q. Would it have been relevant to your  
21 opinion to review Mr. Sanchez's report --  
22 MS. O'DELL: Objection.  
23 BY MS. DAVIDSON:  
24 Q. -- responding to Mr. Longo's testing  
25 for asbestos?

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1 MS. O'DELL: Objection. Form.  
2 THE WITNESS: It might have been  
3 relevant. I wasn't aware that there was  
4 anybody else offering opinions.  
5 BY MS. DAVIDSON:  
6 Q. You'd agree that if there's other  
7 available science refuting Dr. Longo's -- or  
8 rebutting Dr. Longo's opinions, that would be  
9 relevant for you to review in reaching a conclusion  
10 with respect to asbestos and talc; correct?  
11 MS. O'DELL: Objection to form.  
12 Misstates record.  
13 THE WITNESS: Certainly.  
14 BY MS. DAVIDSON:  
15 Q. Dr. Clarke-Pearson, you attached to  
16 your 11/15/2023 expert report an amended list of  
17 materials considered; correct?  
18 A. Yes.  
19 Q. Was that a list you created or did the  
20 lawyers create that for you?  
21 A. They created it after we collaborated  
22 and came up with a list of references that I was  
23 using.  
24 Q. Did you read all the documents that are  
25 listed on that materials reviewed list?

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1 A. I have scanned many of them, looked at  
2 their abstracts. Read some of them in quite  
3 detail.  
4 Q. How did you decide which -- when to  
5 just read the abstract and when to read an article  
6 in full?  
7 MS. O'DELL: Let me just say two things  
8 for the record. Jessica, number one, are  
9 you asking about the recently added  
10 references? Because he's been examined at  
11 length about the references that were -- or  
12 materials that were included in his list in  
13 his November 2018 report.  
14 And then second, I want to make sure  
15 that you had the updated list of materials  
16 that were provided three days before  
17 Dr. Clarke-Pearson's deposition.  
18 MS. DAVIDSON: I would like to state  
19 for the record that this is another example  
20 of you obstructing and filibustering the  
21 deposition because my question very clearly  
22 referred to the 11/15/2023 reliance list.  
23 MS. O'DELL: And you asked him a global  
24 question about everything on the list. He's  
25 previously been asked that question and he's

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1 testified to it. And as you know, this is a  
2 update deposition. This is not a retread of  
3 everything.  
4 And, second, I'm just asking did you  
5 receive in the Dropbox the updated materials  
6 list? I just wanted to make sure we were  
7 communicating and Dr. Clarke-Pearson had in  
8 front of him the list that you're talking  
9 about.  
10 MS. DAVIDSON: It is now 2:00. I will  
11 put the list up after your hearing. But I  
12 will not end this deposition in the middle  
13 of a question. So I need an answer to this  
14 question that's pending before we take our  
15 break for your hearing.  
16 BY MS. DAVIDSON:  
17 Q. Dr. Clarke-Pearson, did you -- how did  
18 you decide -- with respect to the materials on your  
19 amended reliance list, how did you decide when to  
20 read an article in full or when to just read the  
21 abstract?  
22 A. Good question. First of all, when I  
23 did my search, I would look at the title and see if  
24 it was at all relevant to what I was looking for.  
25 And then if it was, then I would open that document

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1 up, usually PubMed, and the scan can go straight to  
2 them in the abstract. And if it was something that  
3 I wanted more detail on, give you the whole paper.  
4 MS. DAVIDSON: Okay. It's 2:00. I  
5 know you guys have a hearing. So we'll  
6 reconvene when I hear from you. Thank you.  
7 (Recess taken from 2:01 p.m. until 3:43 p.m.)  
8 BY MS. DAVIDSON:  
9 Q. Dr. Clarke-Pearson, how did you  
10 identify the new studies that are listed on your  
11 supplemental reliance list?  
12 A. Well, a combination. I think we talked  
13 about searching PubMed in particular, and actually  
14 I use Google once in a while, to search for key  
15 words, talc being a keyword. Ovarian cancer and  
16 talc being a combination that I would use on  
17 PubMed. So identified a number that way as time  
18 goes on -- as time has gone on since the last  
19 deposition. I've also been sent references, papers  
20 from Ms. O'Dell.  
21 Q. Is there a way for me to know which  
22 items on your second amended reliance list you  
23 found on your own and which were sent to you by  
24 Ms. O'Dell?  
25 A. Oh, man, I've looked at them for so

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1 many times, I can't tell you where -- who  
2 identified which. Sorry.  
3 Q. You testified in 2021 that you're not  
4 relying on company documents to support your  
5 opinions; is that correct?  
6 MS. O'DELL: Object to the form.  
7 THE WITNESS: Yes, that's correct.  
8 BY MS. DAVIDSON:  
9 Q. Is that still the case?  
10 A. Yes.  
11 MS. O'DELL: Object to form.  
12 BY MS. DAVIDSON:  
13 Q. Did you add any company documents to  
14 your second amended reliance list?  
15 A. I don't recall.  
16 Q. If you could look at Item 121. Let's  
17 put that up on the screen, Asher. We're marking  
18 your second supplemental reliance list as  
19 Exhibit 17 and let's go to Item 121.  
20 MR. TRANGLE: 121, okay.  
21 (Exhibit 17 marked for identification.)  
22 BY MS. DAVIDSON:  
23 Q. And at 121 says JNJALC001465273. Do  
24 you recall adding that to your supplemental  
25 reliance list?

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1 A. I -- I don't, no.  
2 MS. O'DELL: If you're identifying --  
3 excuse me, if you're identifying something  
4 by Bates Number, which obviously there are  
5 hundreds of combinations of Bates numbers  
6 which would be difficult for anyone to  
7 remember much less in relation to all of the  
8 things that Dr. Clarke-Pearson has reviewed.  
9 If there's a specific document you want to  
10 ask him about, just if you could pull it up  
11 and he could identify it by something other  
12 than a Bates Number.  
13 MS. DAVIDSON: Well, Leigh, I have  
14 asked multiple times today --  
15 MS. O'DELL: It seems to be a very  
16 unfair way to try to identify a document for  
17 him.  
18 MS. DAVIDSON: Leigh, I've asked you  
19 multiple times today to please keep your  
20 objections to objection to form. Your  
21 testimony is not called for here. You're  
22 not the witness. And it is inappropriate  
23 under federal law that you continue to try  
24 to testify and tell the witness what to say.  
25 BY MS. DAVIDSON:

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1 Q. Dr. Clarke-Pearson, correct that you  
2 stated that you don't recall what this document is;  
3 right?  
4 A. I don't even what -- you're talking  
5 about Document 121.  
6 Q. 121, yes.  
7 A. Yes, I don't know what that is.  
8 MS. DAVIDSON: Asher, could you please  
9 mark as Exhibit 18 document Bates Number  
10 JNJALC001465273 which is a March 17, 2020,  
11 comprehensive review.  
12 (Exhibit 18 marked for identification.)  
13 BY MS. DAVIDSON:  
14 Q. Dr. Clarke-Pearson, do you recall this  
15 document now that it's in front of you?  
16 A. I just see a title so far on the  
17 document.  
18 Q. Is the title familiar to you?  
19 MS. O'DELL: I think if you -- I would  
20 request that you put it in the chat so  
21 Dr. Clarke-Pearson can see the document.  
22 BY MS. DAVIDSON:  
23 Q. Is this title familiar to you,  
24 Dr. Clarke-Pearson?  
25 A. Vaguely. Am I not allowed to see the

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1 document?  
2 Q. You absolutely can.  
3 A. Okay. Bring it on.  
4 MS. DAVIDSON: Asher, you want to go to  
5 the next page. It's a big document.  
6 MR. TRANGLE: It's taking a while to  
7 upload to the chat, but it should be added.  
8 BY MS. DAVIDSON:  
9 Q. It's 255 pages, so we obviously can't  
10 show that all to you. But if you could go to the  
11 next page, perhaps this will refresh  
12 Dr. Clarke-Pearson's recollection.  
13 Does this refresh your recollection  
14 Dr. Clarke-Pearson, as to whether you've reviewed  
15 this entire document?  
16 A. I'm sorry, I don't recall this  
17 document.  
18 Q. Do you know how you -- do you know how  
19 you received this document?  
20 A. I believe it would be through my  
21 attorneys.  
22 Q. Did they -- did you ask them for this  
23 document or did they provide it to you without  
24 being asked?  
25 A. I think they provided it to me.

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1 Q. Are you relying on this document in  
2 forming your opinions?  
3 A. No.  
4 Q. Okay. Dr. Clarke-Pearson, if we could  
5 go back to your expert report, page 13.  
6 A. Yes.  
7 Q. To your -- the section of your report  
8 on the dose response. If you could put that up on  
9 the screen, Asher.  
10 Do the Emi Mandarinino papers talk about  
11 dose response?  
12 A. Talk about dose response in terms of  
13 the cell biology modification by exposure to  
14 different doses of talcum, yes.  
15 Q. Did Emi involve multiple exposure  
16 metrics?  
17 A. I believe it did. I'd have to go back  
18 and take a look at it.  
19 Q. If Emi did not involve multiple  
20 exposure metrics, would it be relevant to  
21 biological gradient or dose response?  
22 MS. O'DELL: Objection.  
23 THE WITNESS: Is that a hypothetical  
24 question?  
25 BY MS. DAVIDSON:

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1 Q. You can answer it as a hypothetical if  
2 you don't know the answer to whether Emi involved a  
3 single short-term exposure or a different exposure  
4 dosages, sure.  
5 A. May I look at Emi for a minute?  
6 Q. Sure.  
7 A. Thank you.  
8 Q. If you'd like, I can -- if we could put  
9 Emi page 1068 up on the screen after footnote 40.  
10 Can you see that sentence that says,  
11 "We believe we are the first to show."  
12 "We believe we are the first to show  
13 that a single short-term exposure in vitro to  
14 particles can be linked to epigenome-wide DNA  
15 methylation changes."  
16 Do you see that?  
17 A. Yes, I do.  
18 Q. Does a single short-term exposure tell  
19 you anything about dose response?  
20 A. Shows about exposure, doesn't show  
21 about dose.  
22 Q. Do you know why you cited Emi under  
23 your dose response section of your supplemental  
24 report?  
25 A. Yes. I believe if you look at

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1 Figure 5, you'll see a bar graph that shows dose  
2 response.  
3 Q. Is that relevant to your Bradford Hill  
4 analysis which relates to epidemiology?  
5 MS. O'DELL: Object to form.  
6 THE WITNESS: The question you're  
7 asking me has to do with the dose response  
8 and the experimental -- in an experiment  
9 that uses talc.  
10 BY MS. DAVIDSON:  
11 Q. In the Bradford Hill criteria, does the  
12 dose response biological gradient consideration go  
13 to experimental studies or does it go to  
14 epidemiological studies?  
15 A. Well, as I have my title in my report  
16 here, it's biologic gradient/dose response, which I  
17 interpret to go beyond just talking about dose  
18 response in humans to looking at issues that  
19 overlap with experiment which is also in the  
20 Bradford Hill criteria.  
21 Q. So do the Bradford Hill criteria  
22 suggest that under dose response you should  
23 consider experimental evidence, or is there a  
24 separate consideration for experimental evidence?  
25 MS. O'DELL: Object to form.

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1 THE WITNESS: I think that there's a  
2 separate issue that -- a separate criteria  
3 in Bradford Hill, as I understand it, that  
4 talks about experiments. So doing  
5 experiments support the impact, the  
6 causation of talcum powder causing ovarian  
7 cancer. Those are experiments in the  
8 laboratory -- in those laboratory  
9 experiments, there is a gradient and dose  
10 response in these studies. So I included it  
11 in both places.  
12 BY MS. DAVIDSON:  
13 Q. Okay. Asher, can you go back to  
14 Figure 5.  
15 Can you show me, Dr. Clarke-Pearson, on  
16 Figure 5 where it would suggest that there were  
17 different amounts of talc?  
18 A. Well, I can't do that for you right  
19 now. Maybe -- maybe I'm quoting the wrong figure.  
20 Maybe it's Figure 6 is probably the one that we  
21 should look at.  
22 Q. So looking at Figure 5, which you  
23 identified earlier, that does not show different  
24 amounts of talc; correct?  
25 A. I think I was mistaken. It's actually

Page 216

1 Figure 6.  
2 Q. Can you explain to me how Figure 6  
3 shows different amounts of talc?  
4 A. I guess it's the effect of estrogen.  
5 I'm mistaken. I'm sorry.  
6 Q. Again, does the Emi paper support your  
7 opinion that there's a dose dependent effect of  
8 talcum powder on molecular changes associated with  
9 carcinogenesis?  
10 MS. O'DELL: I'm sorry, would you mind  
11 repeating the last bit, Jessica, you trailed  
12 off.  
13 MS. DAVIDSON: Court reporter, did you  
14 get it.  
15 (The reporter read back the last question.)  
16 THE WITNESS: Give me one moment. I  
17 would like to look at the Harper paper  
18 again.  
19 BY MS. DAVIDSON:  
20 Q. We're talking about the Emi paper, not  
21 the Harper paper.  
22 A. You asked if there's any paper.  
23 Q. I said does the Emi paper, E-M-I.  
24 A. Okay. That's not what I heard.  
25 Q. I heard any, A-N-Y.

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1 A. The Emi paper, I cannot identify an  
2 area where it shows a dose response.  
3 Q. So was that an error in your report?  
4 A. Apparently so.  
5 Q. Did Davis 2021 find a dose response?  
6 A. Let me turn to Davis 2021.  
7 Q. Okay.  
8 MS. O'DELL: So we're starting another  
9 area of inquiry. Christine, I would just  
10 how long have we been going?  
11 THE REPORTER: 14 minutes.  
12 MS. O'DELL: So that's over 4 hours.  
13 All right. Jessica, you understand our  
14 position on four hours. And so in terms of  
15 further inquiry today, you know, you've  
16 exceeded your time limit. I think we've  
17 given you a little extra time actually. So  
18 that's our position.  
19 MS. DAVIDSON: Are you instructing  
20 Dr. Clarke-Pearson not to answer the pending  
21 question?  
22 MS. O'DELL: There was no pending  
23 question. You asked him to look at Davis.  
24 He was pulling Davis.  
25 MS. DAVIDSON: I asked him whether

<p style="text-align: right;">Page 218</p> <p>1 Davis identified a dose response.</p> <p>2 MS. O'DELL: I'll allow him to answer</p> <p>3 that question and then -- and then the</p> <p>4 deposition for today will be concluded.</p> <p>5 THE WITNESS: There is some dose</p> <p>6 response demonstrated here in frequency of</p> <p>7 general powder use in whites -- I'm sorry,</p> <p>8 correct me, I'm wrong on that.</p> <p>9 I would say that I don't see that.</p> <p>10 MS. DAVIDSON: Asher, can we put Davis</p> <p>11 2021 on the screen. Has that already been</p> <p>12 marked?</p> <p>13 MR. TRANGLE: It's not.</p> <p>14 MS. O'DELL: It's not marked and you</p> <p>15 had a question pending. I allowed him to</p> <p>16 answer that question. He responded and --</p> <p>17 MS. DAVIDSON: He did not respond.</p> <p>18 MS. O'DELL: -- you're over four hours,</p> <p>19 Jessica. That's the bottom line.</p> <p>20 MS. DAVIDSON: For the tenth time, you</p> <p>21 are in violation of the order which makes</p> <p>22 very clear that I get 14 hours, number 1,</p> <p>23 which I am not even going to ask. I was not</p> <p>24 going to ask for 14 hours.</p> <p>25 Number 2, he did not finish answering</p>	<p style="text-align: right;">Page 220</p> <p>1 questions with Dr. Clarke-Pearson and not</p> <p>2 going to allow me to ask rebuttal to those</p> <p>3 questions, is that your position?</p> <p>4 MS. O'DELL: That's correct. You know,</p> <p>5 we have a time limit, Jessica.</p> <p>6 MS. DAVIDSON: Yes, we do, in an order</p> <p>7 and it's 14 hours.</p> <p>8 MS. O'DELL: It's four hours.</p> <p>9 MS. DAVIDSON: Leigh, that's false.</p> <p>10 MS. O'DELL: Excuse me. Let me finish,</p> <p>11 Jessica. It's not wrong.</p> <p>12 MS. DAVIDSON: It's false.</p> <p>13 MS. O'DELL: He's already --</p> <p>14 MS. DAVIDSON: False.</p> <p>15 MS. O'DELL: -- been through 14 hours</p> <p>16 on his case specific opinions.</p> <p>17 MS. DAVIDSON: I understand. That</p> <p>18 ruling is from 2023. I mean you're just</p> <p>19 continuing to say false statements.</p> <p>20 MS. O'DELL: You're interrupting. Your</p> <p>21 rudeness -- please don't interrupt me.</p> <p>22 MS. DAVIDSON: You have spent the</p> <p>23 entire day, A, telling me that I only have</p> <p>24 4 hours for a 14-hour deposition, and then</p> <p>25 with very long speaking objections to every</p>
<p style="text-align: right;">Page 219</p> <p>1 the question. He was in the middle of</p> <p>2 answering whether Davis found a dose</p> <p>3 response. First, he said it did, then he</p> <p>4 said he wasn't sure. I don't think he's</p> <p>5 done. I was going to help him out by</p> <p>6 pointing him to the discussion in Davis of</p> <p>7 dose response so that he could answer the</p> <p>8 question accurately. If you'd like to leave</p> <p>9 his inaccurate answer on the record, that's</p> <p>10 your prerogative. We will go to court.</p> <p>11 MS. O'DELL: Well, you've made your</p> <p>12 position clear. You're going to court</p> <p>13 anyway. I believe he answered your</p> <p>14 question.</p> <p>15 Your inquiry today was limited to four</p> <p>16 hours. That's our position. We're going to</p> <p>17 maintain that. I recognize we have a</p> <p>18 disagreement, so be it the Court will have</p> <p>19 to deal with that.</p> <p>20 In terms of your further inquiry, I</p> <p>21 think your questions are concluded for the</p> <p>22 day. I have three small areas I'll follow</p> <p>23 up on.</p> <p>24 MS. DAVIDSON: Wait. Your position is</p> <p>25 that you're now going to follow up with</p>	<p style="text-align: right;">Page 221</p> <p>1 question in order to filibuster my time. So</p> <p>2 please don't me tell me that I was being</p> <p>3 rude.</p> <p>4 MS. O'DELL: That is not accurate and</p> <p>5 you know that. So I'm going to follow up on</p> <p>6 three small areas and then the deposition</p> <p>7 will be concluded for today.</p> <p>8 EXAMINATION</p> <p>9 BY MS. O'DELL:</p> <p>10 Q. So, Dr. Clarke-Pearson, I have a few</p> <p>11 questions for you. First, what was marked</p> <p>12 previously as Exhibit 4, I believe, was a Yahoo</p> <p>13 article that you sent to leadership at ACOG and</p> <p>14 SGO. Do you recall that discussion?</p> <p>15 A. Yes, I do.</p> <p>16 Q. And only a portion of this article was</p> <p>17 put on the screen for you to see at that time, and</p> <p>18 now we've had that printed. And I will mark it for</p> <p>19 purposes of the record if it's not already -- it's</p> <p>20 already been marked, excuse me, Exhibit 4.</p> <p>21 And I'd like for you to look at this</p> <p>22 article, Dr. Clarke-Pearson, and specifically look</p> <p>23 at page 3 of this exhibit. Do you see that --</p> <p>24 A. Yes.</p> <p>25 Q. -- at the bottom?</p>



Page 222

1 And does this article reference that  
2 Johnson's Baby Powder and other talc products  
3 contained asbestos and caused cancer, does it state  
4 that?  
5 A. In this article it says  
6 Johnson & Johnson Baby Powder and other talc  
7 products contain asbestos and cause cancer, which  
8 the company denies.  
9 Q. And when you referred to this article  
10 as referencing asbestos earlier, is that -- is that  
11 what you were referring to?  
12 A. Yes.  
13 MS. DAVIDSON: Objection.  
14 BY MS. O'DELL:  
15 Q. Now, if you would, Dr. Clarke-Pearson,  
16 would you put the Woolen study in front of you, if  
17 you don't have it.  
18 A. I have it.  
19 Q. And just for purposes of the record,  
20 that study was previously marked as -- I believe it  
21 was Exhibit 13. And I would ask you if you would  
22 turn to Table 2 of the study.  
23 A. Okay. I have it.  
24 Q. And, Dr. Clarke-Pearson, what is the  
25 title of Table 2?

Page 223

1 A. Process -- "Table 2. Publications  
2 included in the systematic review. Most frequent  
3 perineal talcum powder use reported for each study  
4 was abstracted."  
5 Q. And so did Dr. Woolen and others make  
6 clear that the data they extracted from the studies  
7 they included would be the data from those studies  
8 that was the most frequent application?  
9 A. That's what it says, yes.  
10 Q. And so when you were asked questions  
11 about Wu and different levels of exposure that were  
12 included in that study, wouldn't the greatest  
13 exposure characterized in Wu be the appropriate  
14 data to have included in the Woolen meta-analysis?  
15 A. That's what it says in Table 2. I  
16 don't recall the table that -- exactly in Wu, but  
17 it was, as I recall, greater than 20 years in a lot  
18 of -- we can pull that up if you want. It seemed  
19 like that was the highest level, yes.  
20 Q. And, also, in regard to Woolen, do you  
21 have the supplemental tables in front of you for  
22 Woolen?  
23 A. Yes.  
24 Q. And I would like to direct you to  
25 Supplemental Table Number 1.

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1 A. I have it.  
2 Q. And in this table, Supplemental  
3 Table 1, did Woolen and others report the data not  
4 only from women with patent fallopian tubes, but  
5 all women?  
6 A. Yes. On the first -- the top part of  
7 the table is all women and nonusers, less frequent  
8 users, and daily users.  
9 Q. And what was the adjusted hazard ratio  
10 for daily users of all women?  
11 A. Adjusted was 1.27 with a confidence  
12 interval of 1.09.  
13 Q. And that was statistically significant?  
14 A. Yes.  
15 Q. And in terms of studies that were  
16 included in Woolen, let me ask you specifically  
17 regarding women with patent tubes. You were asked  
18 some questions about that. Do women who have  
19 hysterectomies or tubal ligation have a patent  
20 reproductive tract?  
21 A. No. I mean this is -- you take out the  
22 uterus, there's no way for talcum powder to get to  
23 the tubes. So the tubes really aren't functional.  
24 And if the tubes have been tied, then they're not  
25 patent either.

Page 225

1 Q. So for studies that excluded in the  
2 exposed cases, women with hysterectomies or tubal  
3 ligation, that would essentially be only included  
4 women in the cases who have patent tracts?  
5 A. If you take out those that have had  
6 hysterectomies and tubal ligations, then the  
7 remaining patients all have patent tubes.  
8 Q. Nothing further, Doctor. Thank you.  
9 A. Thank you.  
10 MS. DAVIDSON: Before we go off the  
11 record, I'm asking you again, am I allowed  
12 to ask follow-up questions on that? You're  
13 not going to let me do that?  
14 MS. O'DELL: You know, Jessica, I --  
15 MS. DAVIDSON: You're continuing to  
16 be --  
17 MS. O'DELL: I'm quite confident that  
18 when it comes to that point in time when we  
19 are examining expert witnesses on behalf  
20 of -- as -- on behalf of the plaintiffs  
21 steering committee, I'm examining a witness  
22 that is a defense expert that you will hold  
23 me to the minute and second. And we've  
24 given you very clear notice about what we  
25 feel the ground rules are here under the

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1 order. And, further, we have given you  
 2 additional minutes, and we're not going to  
 3 give any further.  
 4 MS. DAVIDSON: You are continuing to  
 5 violate the order. And in violating the  
 6 order, not only are you preventing me from  
 7 having the time that I'm entitled to, but  
 8 you are also enabling your witness to  
 9 prepare further for the line of questioning  
 10 that has begun which is highly  
 11 inappropriate. And we will raise this with  
 12 the Court. Thank you. We'll go off the  
 13 record.  
 14 - - -  
 15 (Read and sign reserved.)  
 16 - - -  
 17 (Time noted at 4:09 p.m.)  
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Page 228

1 DEPOSITION ERRATA SHEET  
 2  
 3 Our Assignment No: 348852  
 4 Case Caption: Talcum Powder Litigation MDL 2738  
 5  
 6 DECLARATION UNDER PENALTY OF PERJURY  
 7 I declare under penalty of perjury that I  
 8 have read the entire transcript of my deposition  
 9 taken in the captioned matter or the same has been  
 10 read to me, and the same is true and accurate, save  
 11 and except for changes and/or corrections, if any,  
 12 as indicated by me on the DEPOSITION ERRATA SHEET  
 13 hereof, with the understanding that I offer these  
 14 changes as if still under oath.  
 15 Signed on the \_\_\_\_\_ day of \_\_\_\_\_,  
 16 20 \_\_\_\_.  
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 21 \_\_\_\_\_  
 22 DANIEL CLARKE-PEARSON, M.D.  
 23  
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1 CERTIFICATE OF REPORTER  
 2  
 3 I, Christine A. Taylor, Registered  
 4 Professional Reporter and Notary Public for the  
 5 State of North Carolina at Large, do hereby  
 6 certify:  
 7 That the foregoing deposition was taken  
 8 before me on the date and at the time and location  
 9 as stated in this transcript; that the deponent was  
 10 located in Orange County, North Carolina; that the  
 11 deponent was duly sworn to testify to the truth,  
 12 the whole truth and nothing but the truth; that the  
 13 testimony of the deponent and all objections made  
 14 at the time of the examination were recorded  
 15 stenographically by me and were thereafter  
 16 transcribed; that the foregoing deposition as typed  
 17 is a true, accurate and complete record of the  
 18 testimony of the deponent and of all objections  
 19 made at the time of the examination to the best of  
 20 my ability.  
 21 I further certify that I am neither related  
 22 to nor counsel for any party to the cause pending  
 23 or interested in the events thereof. Witness my  
 24 hand, this 29th of January, 2024.  
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